# **Analyzing The Impact Of Coping Strategies On Well Being: A Correlational Study**

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#### **Abstract**

This is a continuous human urge to deal with stress and anxiety effectively. Well-being is a topic of wide interest amongst academicians, researchers, and social scientists. The environment always affects people in different ways. Every person has a different appraisal of the environment and accordingly, he copes with the demands of the environment. The effectiveness of this coping strategy ensures the well-being of a person. The present study tries to explore the relationship between coping strategies and overall personal well-being. Scores for four coping strategies, Positive Religious Coping (PRC), Negative Religious Coping (NRC), Secular Active Coping (SAC), and Secular Passive Coping (SPC) were measured along with the scores for Well Being. A correlational study is carried out with the help of primary data. The paper discusses the result along with recommending the best coping strategies to ensure well-being.

Keywords: Religious Coping, Secular Coping, Well Being.

#### Introduction

The wave of Covid-19 has left almost the entire world baffled and has significantly impacted the world's largest economies. Most of the countries announced a complete or a partial lockdown to further contain this virus's spread. The lockdown shattered the economic and social life of people around the globe, which has had both physical and mental impacts. The exponential rise of this pandemic across the world triggered a lot of fear, anxiety, and stress. The threat of being infected and the concern for family and friends led to increased stress levels among people (Vibha et al 2020; Gautam and Sharma, 2020).

It has been observed that humans evaluate what is happening to them taking into consideration its significance for their well-being and whether and how they cope with demands depends upon this

appraisal (Lazarus and Folkman, 1987). Thus, from this perspective, stress can be considered as 'a relationship between the person and the environment that is appraised by the person as taxing or exceeding his or her resources and as endangering his or her well-being' (Folkman, 1984).

Coping has been considered to be central in shaping this relationship (Dewe and Guest, 1990). It has been established by previous studies that witnessing a transition can alter a person's emotional balance and perception (both objective and subjective) about their well-being. For a successful transition, behavioral and cognitive strategies need to be implemented (Rodrı'guez et al., 2015).

Coping can be defined as 'cognitive and behavioral efforts to master, reduce, or tolerate the internal and/ or external demands that are created by the stressful transaction' (Folkman, 1984). This definition refers to the efforts undertaken by an individual and not any outcome. Thus, coping efforts can be differentiated from their outcome or in other words, from the success of these efforts (Dewe and Guest, 1990).

Thus, the objective of this research is to examine the efficacy of coping strategies in ensuring well-being amidst this apprehensive scenario. Also, the study aims to identify the relationship between different coping strategies and the level of well-being, to find out which particular coping strategies are related to well-being are which are not.

## **Coping Strategies**

People use different ways to cope with their problems and various life situations (Pargament et al, 2001). A good amount of literature can be found, that has focused on two types of coping strategies: problem-focused (doing something to alter the stress) and emotion-focused strategies (reducing or managing emotional distress) (Galiana et al, 2020). Other terms that can be found in the literature include approach and avoidance coping, which refer to cognitive and emotional activity-oriented either towards or away from threat (Roth and Cohen, 1986).

However, it has also been pointed out that coping is a multidimensional construct, and relying entirely on general distinctions like cognitive vs behavioral, problem-focused vs emotion-focused, and approach vs avoidance strategies may render important ways of coping go unrevealed (Skinner et. al, 2003; Galiana et al, 2020).

A popular categorization of coping strategies is religious coping (RC) and non-religious coping (NRC). It has been observed that individuals combine various religious and non-religious ways to cope with stressful situations (Burker et al, 2005; Brelsford et al, 2016) which are two popular forms of coping that capture specific ways in which individuals cope.

Further, scholars have reported various active and passive or adaptive and maladaptive coping strategies (to refer to various cognitive and behavioral coping strategies used) that are used by people to cope (Brown and Nicassio, 1987). Active strategies refer to attempts to deal with the problem using one's own resources, i.e. active involvement in dealing, and passive strategies refer to surrendering to problems or looking for others to help (Nicholas et al., 1992).

Thus, various coping strategies or ways of coping have been studied and reported by scholars in the area (Carver and Scheier, 1989).

#### **Religious Coping**

The term religious coping refers to "the use of religious beliefs or behaviors to facilitate problem-solving to prevent or alleviate the negative emotional consequences of stressful life circumstances" (Koenig et al, 1998). Religious coping is multidimensional (Pargament et al, 1988) and people use several forms of religious coping like holding religious beliefs, reading religious materials, praying, religious attending, religious discussions etc. (Kilbourne et al, 2009). Religious coping strategies have been further categorized into positive religious coping (also called as PRC) and negative religious coping (also called NRC) (Benore et al, 2008).

The positive pattern is said to consist of practices like religious forgiveness, seeking spiritual support, collaborative religious coping, spiritual connection, religious purification, and benevolent religious reappraisal; whereas the negative pattern is said to include spiritual discontent, punishing God reappraisals, interpersonal religious discontent, demonic reappraisal, and reappraisal of God's powers (Pargament et al, 1998).

## **Secular Coping**

Apart from the religious coping strategies, a number of non-religious, or secular coping strategies have also been studied by scholars in the area (Mc Dougle et al, 2014; Brelsford et al, 2016). Scholars have studied the effects of various cognitive and behavioral secular coping strategies. Several studies have used a modified version of the scale developed by Rosenstiel and Keefe (1983). Coping strategies have been divided into seven heads, including six cognitive strategies and one behavioral strategy, to measure non-religious strategies (Dunn and Horgas, 2004). As discussed in the above section, these strategies have also been studied by further classified into active and passive coping strategies (Mc Dougle et al, 2014) based on previous literature available (Brown and Nicassio 1987; Snow-Turek et al, 1996).

Apart from the above-discussed strategies which are individual strategies, some social strategies have also been considered relevant like volunteering. It has also been found to be an important coping strategy (Oman and Thoresen, 2000).

# **Coping and Wellbeing**

Coping has been time and again considered to play an important role in determining the well-being of an individual (Cicognani, 2011; Tomás et al, 2012). It facilitates adaptation, which in turn influences the appraisal of the situation, and enables to deal with the demands (Boerner, 2004). The literature available in coping is extensive, with several studies undertaken on different categories and dimensions of coping.

Penley, Tomaka and Wiebe (2002) undertook a meta-analysis to find out if coping can be reliably associated with health outcomes. Some strategies were found to have a consistent association across a range of stressors, while some were found to have a situation-specific relationship. As was discussed in the earlier section, a good amount of literature can be found on problem and emotion-focused coping (Galiana et al, 2020). Problem-focused coping has been reported to have

a positive effect on well-being, whereas emotion-focused coping has been reported to have a negative effect on well-being (Mayordomo-Rodríguez et al, 2015; Galiana et al, 2020). A probable reason for the same can be that problem-focused coping helps an individual, to identify situation-specific goals that engage and make him/her feel effective, experiencing situational mastery and control; which is much required for positive well-being (Carver & Scheier, 1998; Klinger, 1998).

Further, active coping has been found to have positive outcomes; like being inversely related to depression and psychological distress, and is positively related to psychological well-being (Hampson et al, 1996; Snow-Turek et al, 1996; Cicognani, 2011).

Also, a lot of scholarly work can be found on religious and nonreligious strategies. Among the different ways of coping with stress, religious coping has been found to show appealing results. A growing body of literature supports the orientation of people towards religion when coping with stressful events. This form of coping has gained much attention from different scholars who have studied its relevance in dealing with stress, health, critical life situations, and mental health-related outcomes (Ano, and Vasconcelles, 2005). In a study undertaken by Pollner (1989) it was established that symbolic relations with a divine other, significantly correlate with the well-being of the individual.

A lot of scholars have reported that positive and negative religious coping was associated with higher and lower levels of stress and well-being respectively (Pargament et al, 2001; Meta-Analysis).

Studies that have analyzed both religious and nonreligious strategies used by people are few. In a study undertaken by Dunn and Horgas (2004) it was reported that individuals make use of collaborative religious strategies more as compared to other strategies. Also, under the non-religious category, behavioral strategies were popular as compared to cognitive strategies.

Bush (Bush et al, 1999) in his study reported the use of a multidimensional conceptualization of religious coping including both positive and negative strategies. Although he observed that positive religious strategies were related to a positive effect, negative religious strategies were not related to the outcome variables, which was a result distinct from the previous researches who have related negative coping with negative outcomes. Further, the study found support for the existing literature on significant relationships between non-religious cognitive and behavioral coping strategies and outcomes.

Mc Dougle, Konrath, Walk, and Handy (2014) in their study found that the use of religious and secular strategies differs between those who considered themselves as religious and non-religious. Further, social approaches to coping are more likely to reduce the stress/risk feelings as compared to individual approaches to coping.

Petru and Jarosova (2019) in their study on coping resources and perceived well-being, found a meaningful relationship between well-being and coping. All the coping resources studied i.e. cognitive, emotional, spiritual/philosophical, and physical resources were found to be associated

with higher well-being. Also, it was established that using a mix of coping resources is related to better well-being. However, contrary to Mc Dougle, Konrath, Walk, and Handy (2014), they found that social coping resources showed no direct association with well-being.

Hence, it can be seen that the literature available in the area of coping is a wide and diverse one. Coping has been gradually accepted as a multi-dimensional construct, and thus scholars have studied various ways of coping, that individuals use to deal with physical and psychological problems. Further, mixed results can be found, since some researchers found strong evidence of coping being effective in dealing with various problems, while others found contrary results for the same strategies. Thus, more research with different samples is required in the area.

#### **Materials and Methods**

A review of the literature available in the area brings into light that both religious and secular coping strategies can be useful for handling situations, and people do use religious and nonreligious coping simultaneously (Bush, 1999). In the current study, we aim to investigate whether the religious and/or secular coping strategies have proven beneficial for people in maintaining their well-being during the Covid-19 crisis. Thus, coping strategies are the independent variable, and well-being is the dependent variable in the study. The study is a cross-sectional study.

The sampling method used was convenient sampling, since the target respondents were common people and not any specific group. Each respondent had to be at least 20 years of age or higher, so that being adults they contribute well to the aim of the study. To capture the responses, three scales (religious coping, secular coping, and well-being) were merged to form a simple set of 24 questions, which could be easily read and answered in form of the general behavior of individuals during the Covid-19 times. The first 8 questions are related to religious coping (first 4 PRC and next four NRC), the next eight questions are related to secular coping (first four of active coping and next four of passive coping), and the last eight questions are related to well-being.

The questionnaire used in the study was prepared by adapting and modifying scales used in previous research, according to the need of the study (Pargament et al, 1998; Mc Dougle et al, 2014; Tennant et al, 2009).

213 Responses were collected anonymously.

Since the available literature in the area of study is found to be mixed, instead of predicting any direction, it was decided to investigate and analyze if any relation existed between the two categories of coping strategies and the perceived well-being of the respondents. The following hypotheses have been formulated:

# Positive Religious Coping and Perceived Well Being

H0- There is no correlation between positive religious coping strategies and perceived well-being. H1- There is a correlation between positive religious coping strategies and perceived well-being.

#### **Negative Religious Coping and Well Being**

H0- There is no correlation between negative coping religious coping strategies and perceived well-being.

H1- There is a correlation between negative religious coping strategies and perceived well-being.

## **Secular Active Coping and Well Being**

H0- There is no correlation between secular active coping religious coping strategies and perceived well-being.

H1- There is a correlation between secular active coping strategies and perceived well-being.

## **Secular Passive Coping and Well Being**

H0- There is no correlation between secular passive coping religious coping strategies and perceived well-being.

H1- There is a correlation between secular passive coping strategies and perceived well-being.

#### **Results**

A person correlation coefficient was computed for the following variables with scores:

Variable 1	Variable 2	Nature of	r- value	p-value
		Correlation		
		(Positive/		
		Negative)		
Positive	Wellbeing	Positive	.304	.000
Religious				
Coping				
Negative	Wellbeing	Negative	175	.011
Religious				
Coping				
Active Secular	Wellbeing	Positive	.602	.000
Coping				
Passive Secular	Wellbeing	Negative	075	.279
Coping				

#### **Discussion and Conclusion**

The correlation between positive religious coping and well-being has been positive and significant though, not very high. The reason being this can be closing down of temples, no religious gathering during a pandemic due to lockdown and restrictions, and also a dearth of religious faith due to continuous death and negative environment. However, the review of literature has indicated a strong impact of religious coping on well-being under a stressful situation, this study stands as an exception to it.

The correlation between negative religious coping and well-being is negative and significant but the value is relatively lower. So, this also shows that even though pandemic negative coping is not an effective mode for well-being.

The correlation between secular active coping and well-being is positive and significant and the value is also high. This shows that if people are involved in active coping, that yields more results than religious coping. Especially during the crisis, if counseling services are provided to people to enable them to understand the issues thoroughly, this will be the most effective mechanism of ensuring the well-being of people.

The correlation between secular passive coping, as expected from a review of literature, was not significant which shows that passive coping does not affect the well-being on a long-term basis. The overall wellbeing can only be ensured with the active involvement of the individual.

So, there must be mechanisms involved for active coping with the issues during any stress or anxiety-producing situations. Active coping using seeking information regarding the problem, seeking professional help and guidance, seeking social support, and adapting according to the environment is the most effective method to ensure overall wellbeing.

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## **Appendices**

### **Questions:**

I try to find peace through praying.
I read religious books and other religious texts.
I have a strong faith in God's power.
I worship God daily and believe that he will
protect me.
I feel it is a form of punishment given by God.
I feel that some evil energy is making this happen.
I have started questioning the power of God.
I wonder if God is neglecting me.
I try to see the positive in whatever is happening.
I try to accept the reality.
I have learned to live with it.
I try to concentrate on what is required to be done
by me in this situation.
I am fed up with what is happening all around.
I engage myself in things like watching TV,
listening to music, reading books, cooking,
sleeping, internet entertainment, etc. to think less
about the situation.
I cannot believe that it is happening.

	I often express the unpleasant feelings that I am experiencing.
Well-being	I am hopeful about the future.  I feel calm.
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	I can manage daily things well.
	I am certainly aware of my potential.
	I feel solitude is necessary to relax and explore the
	self.
	I am getting support from my near and dear ones.
	I have been interested in trying new things.
	I can plan my day/week to engage in something
	interesting/useful.