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COPING STRATEGIES AND PSYCHOLOGICAL WELL-BEING: A STUDY ON A SELECTED PSYCHOLOGICAL ISSUE OF THE POST-GRADUATE STUDENTS IN KARNATAKA UNIVERSITY

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Abstract:

The mean aim of the present study was to explore the relationship between the coping strategies and psychological wellbeing of college students hurt in relationship. Purposive sample of 322 students are taken as sample for the present study. The participants are recruited students from main campus studying in various departments of Karnataka University, Dharwad respondents selected through using simple random sampling and Dharwad was research area. The researcher employed COPE Inventory, scale developed by Carver (1989), which measured coping in 15 areas The full length version of the COPE Inventory was used to measure stress coping skills and Ryff's Psychological Well-Being Scale (1995) This is a 18 item scale used to assess the psychological well-being. Pearson correlation coefficients and Stepwise multiple regression were employed in the analysis to find out the relationship between coping and psychological wellbeing and to predict psychological wellbeing from coping strategies. Results revealed that a total of 63.5% of the psychological wellbeing contributed by 11 coping strategies of the students hurt in relationship. Positive reinterpretation and growth, focus on and venting of emotions and behavioral disengagement coping strategies contributed maximum to the psychological wellbeing of the sample hurt in relationships. Denial, active coping, acceptance, use of emotional social support, use of instrumental social support and planning contributed least to the psychological wellbeing. Religious coping and restraint coping strategies moderately contributed to psychological wellbeing.

Keywords: Coping strategies, Psychological well-being, Hurt in relationship, Positive reinterpretation, Growth

1.0 Introduction:

Well-being is an extensive construct and is characterized in multiple ways in literature. It has been essentially seen from an intra-personal viewpoint; something that occurs inside a person. Mental well-being is normally conceptualized as a mix of positive full of feeling states, for example, a state of happiness (the hedonic point of view) and working with ideal effectiveness in individual and their social activity (the eudemonic viewpoint). Ryff and Singer (1998) utilized the term 'human flourishing' and Felce and Perry (1995) consider it a containing object descriptors and subjective assessment of physical, material, social and emotional wellbeing. Ryan and Deci (2000) recommend that people have three fundamental psychological needs; competence, self-sufficiency and relatedness. The fulfilment of these requirements leads to both subjective and psychological. Wellbeing is one of the most significant objectives which people and societies make progress toward. The term indicates that something is in a good state. The idea of wellbeing suffers

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definitional issues. In an orderly review of the definitions, Pollard and Lee (2003) explain wellbeing as "a complex multi-faceted constructs that has continued to elude researcher's attempts to define and measure it". Wellbeing has been characterized as a unique state described by a sensible measure of amicability between a person's capacities, needs and desires and natural demands and opportunities. Psychological wellbeing in straightforward terms could be characterized as the condition of being well, happy or prosperous. Psychological wellbeing is a subjective term which implies various things to various individuals. As summarized by Huppert (2009) "psychological well-being is about lives going well. It is the combination of feeling good and functioning effectively. People with psychological well-being report feeling happy, capable, well-supported, and satisfied with life and so on." The term Psychological wellbeing is utilized all through the health business as a catch-all expression, which means, satisfaction, fulfillment with all components of life, self-realization (a sentiment of having accomplished something with one's life) harmony and happiness. Psychological wellbeing points to both subjective and emotional perspectives (Schlosser, 1990). Psychological wellbeing implies an individual's evaluative responses to their life either as far as life fulfilment, intellectual assessment or influence, progressing enthusiastic responses (Diener & Diener, 1995). As such, people consistently and essentially live based on some comprehension of what is better, increasingly alluring or worthier method for being in world (Christopher, 1992; Christopher & Fowers, 1996; Coan, 1997, Taylor, 1989). Presently, Psychological wellbeing is being recognized and is getting a little consideration. Interest for Psychological wellbeing and positive emotional well-being appears to have crested between the late 1950s and 1970s. Since this time, interest appears to have reduced, particularly in the kind of theorizing done by Jahoda (1958), Maslow (1968, 1971) and Shostrom (1973) with the possible exception of the to some degree minimized field of 4 transpersonal psychologies. Seedhouse (1995) saw that the expression "Well-being" as used right now in the promotion of health literature is a very vague notion. While psychologists accept that wellbeing is developed out of three parts (1) Life satisfaction (2) Positive effect and (3) Low negative effect.

Coping strategies point there cognizable action patterns of intellectual as well as behavioral efforts to oversee situational demands which are seen as taxing or surpassing individual's capacity to change or adjust (Lazarus &Folkman, 1984). Coping strategies are only different strategies used by the individual to conform to the distressing encounters. It is seen that extreme stress experiences produce various coping behaviour among the individuals. Numerous researchers have investigated various types of coping strategies like problem centered, emotion centered, denial, and so on (Thoits, 1995). Few of the researchers likewise use the term coping behaviors to tap coping strategies used by people. Researchers examining coping as a process, think about the individuals' access to distinctive coping methods over the timeframe as they assess circumstances to be diverse inside the stress cycle. Coping as a process advances throughout the years or months, contingent on the causes and phases of stress. The process changes generously over a period and achieves various stages during the course. When coping is studied as a process, the significant center is upon the flexibility it gives to the individual. As the transactional approaches believe stress to be an association between individuals-environment, researchers propose coping likewise to be flexible efforts with regards to an individual-situation relationship. Along these lines, coping is conceptualized as a process (Lazarus & Lazarus, 2006). Coping changes over some undefined time frame considering situational settings (Lazarus, 1993). Absolutely, the changes are not random and transpire due to steady examination and reappraisal of individual-environment relationship (Edwards, 1988; Lazarus & Folkman, 1984). Subsequently, the process approach of coping considers flexibility inside or across conditions. Likewise, it thinks about the individual just as an environmental impact after coping strategies (Aldwin, 2007). Coping styles are methods for adapting individual's inclination to respond to unpleasant experience regardless of circumstance or time (Compas, 1987; Roth & Cohen, 1986). Coping style thinks about the reliable example of adapting conduct of an individual without the impact of the sort of stressors and environmental condition/demands (Aldwin, 2007). Coping as a process emphasizes on flexibility, coping styles stresses upon consistency. It studies the preferred strategies of coping utilized by individual relying on their desire, self-concept, and belief system about the world. The style of coping to a great extent relies on the person as it will be steady with the individual qualities, beliefs, traits of personality, and objectives. Coping style shows inclination of an individual to react with a certain goal in mind in distressing conditions (Lazarus & Lazarus, 2006). Be that as it may, coping style does not exclusively rely upon the character of the individual. The coping styles continually impact adapting considerations and activities, in this manner, character dispositions may impact stable coping actions (Lazarus, 2006). Generally, this method utilized standard personality attributes like toughness to examine coping styles. But, research of recent times on coping tendencies of a person by enquiring person's course to deal with stressful circumstances without thinking about specific stressors (Endler & Parker, 1990), hence, recognizes person's unique and persevering style of coping without connecting them to person's personality qualities.

The current study to explore the relationship between the coping strategies, psychological wellbeing and other psychosocial variables from college student hurt in relationship.

2.0 OBJECTIVES OF THE STUDY:

- To find out the relationship between coping strategies and Psychological Well-Being of college student Hurt in Relationship.
- To find out the major predictors of psychological wellbeing by various coping strategies

3.0 METHOD:

3.1 Research design:

In the present study adopted Descriptive Research Design to study the relationship between coping strategies and Psychological Well-Being among people hurt in relationship.

3.2 Sampling:

Purposive sample of 322 students are taken as sample for the present study. The participants are recruited students studying in various departments of Karnataka University, Dharwad.

3.3 Tools:

3.3.1 Self-attested demographic questioners:

The self-attested demography comprised of questions regarding the name, age, sex, domicile and place of study.

3.3.2 Ryff's Psychological Well-Being Scale (1995):

This is a 18 item scale used to assess the psychological well-being. The six inter correlated dimensions are: Self-Acceptance (SA), Positive Relations with Others (PR), Autonomy (AU), Environmental Mastery (EM), Purpose in Life (PL) and Personal Growth (PG). The test-retest reliability coefficient of RPWBS was 0.82. The subscales of Self-acceptance, Positive Relation with Others, Autonomy, Environmental Mastery, Purpose in Life, and Personal Growth were found to be 0.71, 0.77, 0.78, 0.77, 0.70, and 0.78 respectively, which were statistically significant (p<0.001). The correlation coefficient of RPWBS with Satisfaction with Life, Happiness, and Self-esteem were also found to be: 0.47, 0.58, and 0.46 respectively which were also significant (P<0.001).

3.3.3 COPE Inventory Scale developed by Carver, C. S., (1989):

COPE Inventory (Carver, 2007). The full length version of the COPE Inventory (Carver, 2007) was used to measure stress coping skills. The COPE Inventory measures how people respond to general life stressors. It was designed to be used for any context (Carver et al., 1989). The COPE Inventory has 15 dimensions with 4 items each, for a total of 60 items. The COPE items were measured using a 4 point Likert-type scale including 1 (I usually don't do this at all), 2 (I usually do this a little bit), 3 (I usually do this a medium amount), and 4 (I usually do this a lot). Participants were asked questions such as "I try to grow as a person as a result of the experience" or "I just give up trying to reach my goal." Participants were considered to have good coping skills if they scored high on positive subscales such as Active Coping or Planning. If participants scored high on negative scales, such as Substance Use or Focus on and Venting of Emotions, they were considered to have poor coping skills. Carver et al. obtained the following Cronbach's alpha reliability coefficients in their study on hundreds of participants: Positive Reinterpretation & Growth = .68, Mental Disengagement = .45, Focus on & Venting of Emotions = .77, Use of Instrumental Social Support = .75, Active Coping = .62, Denial = .74, Religious Coping = .92, Behavioral Disengagement = .63, Restraint = .72, Use of Emotional Social Support = .85, Acceptance = .65, Suppression of Competing Activities = .68, and Planning = .80. Carver et al. (1989) originally did not include the Substance Use subscale and Humor subscale in the COPE Inventory. The subscales were later added by Carver et al. (Greer, 2007). Greer (2007) used the COPE Inventory in a study on 203 college students, and stated that they obtained Cronbach's alphas for the Substance Use and Humor subscales, from Carver et al. Cronbach's alphas of .93 for Substance Use and .90 for Humor were listed in Greer (2007). Carver et al. (1989) assessed the coping subscales of the COPE Inventory to personality characteristics of individuals who engaged in specific coping skills. They found evidence for convergent validity in the sense that specific copings skills were linked to predicted personality traits. There was also evidence for discriminate validity. The coping skills and personality traits complemented each other, but were still distinctly different (Carver et al., 1989).

4.0 RESULTS:

Variables	Category	Frequency	Percent	
Gender	Female	165	51.2	
Gender	Male	157	48.8	
	<21	59	18.3	
Age	22-23	198	61.5	
	24 & above	65	20.2	
	M A	163	50.6	
T deservices	M Sc	31	9.6	
Education	M B A	68	21.1	
	M Com	60	18.6	
Total	-	322	100.0	

Table 1: Demographical variables

Source: Computed by the authors

The above table demonstrates the Distribution of socio-demographic details of the majority of the respondents constituted of 48.2% of the males and 51.2% of the female students. Age-wise comparison revealed that majority of 61.5% them were in the age group of 22-23 years, followed by 20.2% of them were in the age group of 24 and above years and remaining 18.3% of the respondents belonged to below 21 years. A large majority of 83.5% of them belonged to Hindu religion, 11.8% of them were Islam and others constituted 4.7%. Education-wise, 50.6% of them were pursuing M.A. Course, 21.% of them were pursuing M.B.A course, 18.6% of were pursuing M.Com course and 9.6% of them were pursuing M.Sc. course.

		Components of psychological wellbeing							
Coping strategies		Autonomy	Environmental Mastery	Personal Growth	Positive relationship with others	Purpose in life	Self- acceptance	Total PWB	
Positive	Cor	036	162	.187	.212	281	044	096	
reinterpretation and growth	Sig.	.518	.004	.001	.001	.001	.427	.085	
Mental	Cor	227	314	.038	091	016	155	306	
disengagement	Sig.	.001	.001	.497	.102	.774	.005	.001	
Focus on and venting of emotions	Cor	054	328	.026	011	180	249	317	
	Sig.	.337	.001	.637	.841	.001	.001	.001	
Use of	Cor	119	428	.203	.207	112	384	263	
instrumental social support	Sig.	.032	.001	.001	.001	.045	.001	.001	
Active coping	Cor	102	129	.233	.175	368	030	156	
	Sig.	.069	.020	.001	.002	.001	.594	.005	
Denial	Cor	109	.005	.039	.095	094	.072	020	
	Sig.	.051	.935	.491	.088	.093	.195	.719	
Religious coping	Cor	.185	.204	.100	.314	098	.077	.288	
	Sig.	.001	.001	.074	.001	.079	.167	.001	
Humor	Cor	.054	056	098	.031	.037	215	064	
	Sig.	.333	.316	.078	.584	.512	.001	.249	
Behavioral disengagement	Cor	088	272	164	032	154	190	334	
	Sig.	.115	.001	.003	.567	.006	.001	.001	
D	Cor	.076	.068	.059	.082	.108	.152	.214	
Restraint	Sig.	.175	.227	.289	.140	.054	.006	.001	
Use of emotional	Cor	052	287	.089	.171	285	246	262	
social support	Sig.	.348	.001	.111	.002	.001	.001	.001	
Substance use	Cor	437	219	008	.063	.112	089	228	
	Sig.	.001	.001	.888	.257	.044	.113	.001	
A cooptop co	Cor	112	050	089	145	036	.045	152	
Acceptance	Sig.	.045	.372	.113	.009	.515	.425	.006	
Suppression of	Cor	.164	163	113	101	.153	146	029	
competing activities	Sig.	.003	.003	.042	.069	.006	.009	.605	
Planning	Cor	.045	092	220	.013	.064	036	042	
	Sig.	.419	.098	.001	.816	.251	.523	.454	

Table 2: Results of Pearson's product moment correlations between components of psychological wellbeing and various coping strategies

Source: Computed by the authors

Autonomy component of psychological wellbeing was found to be significantly and positively related to religious coping (r=.185; p=.001) and suppression competing activities (r=.164; p=.003), where we find that as the autonomy increased, coping with religion and suppression of coping activities also increased, Further, autonomy component of psychological wellbeing was found to be significantly and negatively related to mental disengagement (r= -.227; p=.001), use of instrumental social support (r= -.119; p=.032), substance use (r= -.437; p=.001) and acceptance (r= -.112; p=.045) where we find that as the autonomy increased, scores in these coping strategies decreased linearly. However rest of the coping strategies were not significantly related to autonomy.

Environmental Mastery was found to be significantly and positively related to religious coping (r=204; p=.001), where we find that as the environmental mastery increased, religious coping also increased. Further, Environmental mastery component of Psychological wellbeing was found significant and negatively related to Positive reinterpretation and growth (r= -.162; p= .004), Mental disengagement (r= -.314; p= .001), Focus on and venting of emotions(r= -.328; p= .001),

Use of instrumental social support(r= -.428; p= .001), Active coping(r= -.129; p= .020), Behavioral disengagement(r= -.272; p= .001), Use of emotional social support (r= -.287; p= .001), Substance use (r= -.287; p= .001)and Suppression of competing activities (r= -.163; p= .003)where we find that as the Environmental mastery increased, scores of these coping strategies decreased linearly. However the other remaining coping strategies weren't significantly related to environmental mastery.

The personal growth was found to be significantly and positively related to Positive reinterpretation and growth (r= .187; p= .001), Use of instrumental social support (r= .203; p= .001) and Active coping (r= .233; p= .001), where we find that as the personal growth increased, Positive reinterpretation and growth, Use of instrumental social support and Active coping increased respectively. Further, Personal growth component of psychological wellbeing showed significant and negative relation with Behavioral disengagement (r= -.264; p= .003), Suppression of competing activities (r= -.113; p= .042) and planning (r= -.220; p= .001) which interprets that as Personal growth increased the Behavioral disengagement, Suppression of competing activities and planning decreased linearly. However rest of the coping strategies were not significantly related to personal growth.

The Positive relationship with others was found to be significantly and positively related to Positive reinterpretation and growth (r= .212; p= .001), Use of instrumental social support (r= .207; p= .001) and Active coping (r= .175; p= .002), Religious coping (r= .314; p= .001), Use of emotional social support (r= .171; p= .002) where we find that as the Positive relationship increased, Positive reinterpretation and growth, Use of instrumental social support Active coping increased respectively. Further Positive relationship component of psychological wellbeing showed significant and negative relation with Acceptance (r=-.145; p= .009) which interprets that as Positive relationship increased the Acceptance decreased linearly. However rest of the coping strategies were not significantly related to Positive relationship.

The Purpose in life component of Psychological Wellbeing was found to be significantly and positively related to Substance use (r= .112; p= .044) and Suppression of competing activities (r= .153; p= .006) where we find that as the Purpose in life increased, Substance use and Suppression of competing activities increased respectively. Further, Purpose in life component of psychological wellbeing showed significant and negative relation with Positive reinterpretation and growth (r= -.281; p= .001), Focus on and venting of emotions(r= -.180; p= .001), Use of instrumental social support(r= -.112; p= .045), Active coping(r= -.368; p= .001), Behavioral disengagement (r= -.154; p= .006), Use of emotional social support (r= -.285; p= .001), which interprets that as Purpose in life increased the Positive reinterpretation and growth, Focus on and venting of emotions, Use of instrumental social support decreased linearly. However rest of the coping strategies were not significantly related to Purpose in life.

The Self-acceptance component of Psychological Wellbeing was found to be significantly and positively related to Restrain (r= .152; p= .006) where we find that as the Self-acceptance increased, Restrain increased respectively. Further, Self-acceptance component of psychological wellbeing showed significant and negative relation with Mental disengagement(r= -.155; p= .005), Focus on and venting of emotions (r= -.249; p= .001), Use of instrumental social support(r= -.384; p= .001), Humor (r= -.215; p= .001), Behavioral disengagement (r= -.190; p= .001), Use of emotional social support (r= -.246; p= .001) and Suppression of competing activities (r= -.146; p= .009), which interprets that as Self-acceptance increased, Mental disengagement, Focus on and venting of emotions, Use of instrumental social support, Active coping, Behavioral disengagement, Use of

emotional social support and Suppression of competing activities decreased linearly. However rest of the coping strategies were not significantly related to Self-acceptance.

Total Psychological Wellbeing was found to be significantly and positively related to Religious coping (r=.288; p=.001) and Restrain (r=.214; p=.001) where we find that as the Total Psychological Wellbeing increased, Religious coping and Restrain increased respectively. Further, the total Psychological Wellbeing showed significant and negative relation with Mental disengagement(r=-.306; p=.001), Focus on and venting of emotions (r=-.317; p=.001), Use of instrumental social support(r=-.263; p=.001), Active coping (r=-.156; p=.005), Behavioral disengagement (r=-.334; p=.001), Use of emotional social support (r=-.262; p=.001) Substance use (r=-.228; p=.001), Acceptance (r=-.152; p=.006) which interprets that as the total Psychological Wellbeing increased, Mental disengagement, Focus on and venting of emotions, Use of instrumental social support, Active coping, Behavioral disengagement, Use of emotional social support, Substance use, Acceptance decreased linearly. However rest of the coping strategies were not significantly related to the total Psychological Wellbeing.

Model	Variables Entered	R	R ²	Adjusted R ²	Contribution
1	Behavioral disengagement	.334	.111	.109	10.9 %
2	Religious coping	.461	.213	.208	9.9 %
3	Positive reinterpretation and growth	.605	.366	.360	15.2 %
4	Focus on and venting of emotions	.691	.477	.471	11.1%
5	Restraint	.731	.534	.527	5.6 %
6	Use of instrumental social support	.749	.561	.553	2.6 %
7	Acceptance	.761	.580	.570	1.7%
8	Active coping	.770	.594	.583	1.3 %
9	Planning	.787	.620	.609	2.6 %
10	Use of emotional social support	.799	.639	.627	1.8%
11	Denial	.805	.647	.635	0.8%

Table 3: Results of step-wise multiple regression for predicting psychological wellbeing from various coping strategies

Source: Computed by the authors

Stepwise multiple regression revealed that out of 15 coping strategies, most of the coping strategies (11) predicted psychological wellbeing of the selected sample who was hurt in relationship. The 11 variables entered in the equation to predict the psychological wellbeing of the sample were behavioral engagement, religious coping, Positive reinterpretation and growth, Focus on and venting of emotions, Restraint, Use of instrumental social support, Acceptance, Active coping, Planning, Use of emotional social support and denial. The contributions made by each of the variable in stepwise manner are 10.9%, 9.9%, 15.2%, 11.1%, 5.6%, 2.6%, 1.7%, 1.3%, 2.6%, 1.8%, and 0.8% respectively. From the table it is clear that Positive reinterpretation and growth, Focus on and venting of emotions and Behavioral disengagement coping strategies contributed maximum to the psychological wellbeing of the sample hurt in relationships, whereas denial, active coping, acceptance, use of emotional social support, use of instrumental social support and planning contributed the least, and remaining strategies religious coping and restraint coping strategies moderately contributed to psychological wellbeing. All these 11 coping strategies contributed to 63.5% of the psychological wellbeing of the sample who hurt in relationships. Remaining 36.5% of the contribution to the psychological wellbeing unaccounted for. However 4 coping strategies-Mental disengagement, humor, Substance use and Suppression of competing activities did not enter into the equation, hence did not predict the psychological wellbeing of the sample.

5.0 DISCUSSION:

5.1 Major findings of the study:

- A total of 63.5% of the psychological wellbeing contributed by 11 coping strategies of the students hurt in relationship
- Positive reinterpretation and growth, Focus on and venting of emotions and Behavioral disengagement coping strategies contributed maximum to the psychological wellbeing of the sample hurt in relationships
- Denial, active coping, acceptance, use of emotional social support, use of instrumental social support and planning contributed least to the psychological wellbeing
- Religious coping and restraint coping strategies moderately contributed to psychological wellbeing

The present study aim was to explore the relationship between the coping strategies, psychological well and other psychosocial variables from college student hurt in relationship. The psychological well-being in this study was analyzed with six other elements which include: Autonomy, Environmental Mastery, Personal growth, positive relation with other individuals, Purpose of life and Self-acceptance and Coping strategies was also seen with 15 features which follows: Positive reinterpretation and growth, Mental disengagement, Focus on and venting of emotions, Use of instrument social support, Active coping, Religious coping, Denial, Humor, Behavioral disengagement, Restraint, use of emotional social support, Substance use, acceptance, Suppression of competing activities and Planning.

Hurt in relationship significantly shows difference with only components of psychological wellbeing like autonomy and purpose of life because autonomy assess the freedom of choice and purpose of life make you think about your existence in this study when you get hurt in your relationship allow you to think about your psychological well-being which is necessary to knock you for the next step of your life. Hence, Reason for hurt in relationship shows significantly difference with the Positive reinterpretation and growth, Focus on and venting of emotions, Use of instrumental social support, Active coping, Denial, Behavioral disengagement, Acceptance and planning it means to explain that the majority of them in study were reported interpersonal issue was reason for hurt in relationship and the coping strategies might be reflect in different way as when person get hurt in relationship would feel sad or helpless and this particular situation person should seek support or should use their coping strategies which would be in different way that is what his study results explains. In other side with psychological well-being it was understood as significant difference. The other few studies demonstrated the difference analysis on psychological well-being and socio-demographic variables which showed significant variance in well-being with education, social class, age, ethnicity of the young adults (Herzog et al., 1982; Larson, 1978). However current study is also reported similar evidence with education and ethnicity and in some were in the different study author also mentioned that there is a clear need for developed theoretical supervision in way to classify the critical influences on well-being and to formulate the mechanisms by which these influences occur (Diener, 1984) this would help for student to improve their psychological well-being.

The correlation results in the present study illustrate that Feeling happy is positively correlated with income it means to say that income plays important role in making up happy because income fulfills the basic needs of the person. Hurt in relationship is negatively correlated with feel happy because person when get hurt in relationship would stay unhappy. However in other side psychological well-being is positively correlated with feels happy which indicates that happy

emotional feeling is necessary for person for their psychological well-being. The similar study was reported that there were positive correlations between elements of psychological well-being like environmental mastery and personal growth in girls students but the autonomy was negatively correlated with social support from boys (Sagoneet al, 2014) and the positive correlation between elements of psychological well-being like autonomy, environmental mastery, personal growth and self-acceptance with problem solving coping (Sagoneet al, 2014).

Positive reinterpretation and growth which is sub factor of coping strategies is positively correlated with psychological well-being hence, all positive development in person contributes for psychological well-being. In other side mental disengagement shows positive correlation with income and negative correlation with psychological well-being and Positive reinterpretation and growth it means that college student were not able to defined there way when situation is hard and the level of choosing next plan in problem task is less that is why student are lacking to have their psychological well-being and enhancing the positive reinterpretation and growth. However in other side Focus on and venting of emotions is positively correlated with income and mental disengagement. Use of instrument social support is positively correlated with income and Positive reinterpretation and growth, Mental disengagement and Focus on and venting of emotions and negative correlation with health problems and psychological well-being. Active coping is positively correlated with psychological well-being, Positive reinterpretation and growth and Focus on and venting of emotions. Denial also shows positive correlation with income, Positive reinterpretation and growth, Focus on and venting of emotions, Use of instrument social support and Active coping. Religious coping is also shows positive correlation with psychological wellbeing, Positive reinterpretation and growth, Focus on and venting of emotions, Use of instrument social support, Active coping and Denial. Humor is positively correlated with education, positive reinterpretation and growth, mental disengagement, Focus on and venting of emotions, Use of instrument social support, active coping and denial. Behavioral disengagement is positively correlated with education, psychological well-being, Mental disengagement, Focus on and venting of emotions, Use of instrument social support, active coping, denial and religious coping. And negative correlation with health problem; feel happy and hurt in relationship.

Restraint is positively correlated with education, hurt in relationship, Mental disengagement, Use of instrument social support, active coping, denial, religious coping and humor and negative correlation with health problems and Positive reinterpretation and growth. Use of emotional social support is positively correlated with education, psychological well-being, Mental disengagement, Focus on and venting of emotions, Use of instrument social support, active coping, denial, religious coping, humor, Behavioral disengagement and Restraint in other side it is negatively correlated with health problems.

Substance use is negatively correlated with psychosocial well-being which means college students who hurt in relationship are adopted substance use was coping that is their psychosocial wellbeing is neglected. The other elements like Positive reinterpretation and growth, Mental disengagement, Focus on and venting of emotions, Use of instrument social support, Active coping, Religious coping, Humor and Restraint were showed significant positive correlation. Acceptance is positively correlated with, Mental disengagement, Use of instrument social support, active coping, denial, religious coping, Behavioral disengagement and Restraint. When student adapted the acceptance as coping mechanics then it will positivity reduced there stress and helps in learning positive coping ability. Suppression of competing activities is positively correlated with education, Mental disengagement, Focus on and venting of emotions, Use of instrument social support, Active coping, Religious coping, Humor, behavioral disengagement, Restraint, use of emotional social support, substance use and acceptance because college student in this study were able to involve them self with other activities and they were also aware about the distraction activities when they get to feel hurt them self in relationship and they were tried to come out from the problem. It is also negatively correlated with health problem and psychological well-being. Planning is negatively correlated with health problems and positive correlation with psychological well-being, Positive reinterpretation and growth, Active coping, Religious coping, Humor, behavioral disengagement, Restraint, use of emotional social support, substance use, acceptance and Suppression of competing activities. Thus the study reported that students likely to use positive interpretation, problem solving, social support coping and whilst to use the avoidance humor and religion coping in a reduced way as coping strategies (Sagone & Caroli, 2014) in the current study college student were greatly used positive reinterpretation and growth, Focus on and venting of emotions, use of instrument social support, Active coping, religious coping and Use of emotional social support used as coping strategies however substance use was reported but this would not be a healthy coping if student limit their actions therefore further intervention studied should be design to enhance college student coping strategies in order to reduce other social issues for them.

An Australian research consisting of students and teachers concluded their study on a note that the use of various coping strategies such as positive cognitions, physical activity, humor and time management was linked with less stress and anxiety among the students and teachers (Murray Harvey et al. 2002).

Watson and Sinha (2008) revealed that emotion-focused coping seems to be a strong predictor of psychological disorder; hence, more emphasis on the use of avoidance strategies to the detriment of approach strategies may lead to a factor of psychopathological possibility. Few authors mentioned that, an important point in establishing the relations between coping type and psychological wellbeing is not so much the number of approach or avoidance strategies used to deal with the stressor, but the proportion between the two (Vitalino et al. 1985).

Green & Elliott (2009) found that emotion-focused coping strategies were associated with greater stress and depression, whereas humor was associated with less emotional quality of life. In addition, negative religious coping was associated with greater depression among patients, and was associated with greater perceived stress. This study highlights that both nonreligious coping styles and religious/spiritual coping styles can be conceptualized as adaptive or maladaptive. The authors also found that particular coping styles (emotion-focused coping, humor, and negative religious coping) were associated with poorer mental health outcomes.

One more table enlightens the liner regression and the components from coping strategies like focus on and venting of emotions shows significant and positive relationship with income, religion and domicile. The use of social instrument social support significant and positive relationship with income and psychological well-being. Denial with Income. Humor with education and psychological well-being. Behavioral disengagement is with education, domicile, and psychological well-being. Restraint is with education and psychological well-being. Use of emotional social support is with education, psychological well-being. Acceptance is with income, religion and domicile. Suppression of competing activates is with education and psychological well-being. Mental disengagement, Religious coping and Substance use is with psychological well-being. Hence coping psychological well-being and coping strategies are inter correlated with its elements which evidenced that when college student use coping strategies they would satisfied in psychological well-being.

6.0 CONCLUSION:

The present study indicates and reported the study hypothesis are accepted because psychological well-being and coping strategies relationship is significantly correlated and other sociodemographical factors also correlated with psychological wellbeing and coping strategies. Thus the factors which influence for psychological well-being and for coping were identified as income, education and domicile also hurt in relationship along the reason for hurt in relationship. When this variables were also positively correlated in regression analysis. The author suggests from there result for further research on intervention studies which can be training program for the same population were they would be benefited and should learned the healthy ways with coping strategies which can help them to reduce the stress like hurt in relationship.

7.0 CONFLICT OF INTEREST: NIL

References:

Aldwin, C.M. (2007) Stress, coping, and development: An integrative perspective (2nd ed.) New York, NY: Guilford Press.

Carver, C. S., (1989) Assessing coping strategies: a theoretically based approach. J PersSoc Psychol. 56(2):267-83.

Christopher, J. C. (1992). The role of individualism in psychological well-being: Exploring the interplay of culture, ideology, and the social sciences. *Unpublished doctoral dissertation*, The University of Texas at Austin

Christopher, J. C., & Fowers, B. J. (1996). Multiculturalism, culture and moral visions. In R. T. Carter & L. DeSole (Eds.), What is multiculturalism: *Proceedings of the 12th annual Teachers College roundtable discussion on cross-cultural psychology and education* (pp. 1122). New York: Columbia University

Coan, R. W. (1977). Hero, artist, sage or saint? New York: Columbia University Press.

Compas, B. E. (1987). Coping with stress during childhood and adolescence. Psychological Bulletin, 101, 393-403.

Diener, E., & Diener, M. (1995). Cross-cultural correlates of life satisfaction and self-esteem. *Journal of Personality and Social Psychology*, 68(4), 653–663.

Edwards, J. R. (1988). The determinants and consequences of coping with stress. In C. L. Cooper & R. Payne (Eds.), *Causes, coping, and consequences of stress at work* (pp. 233-263). New York: Wiley.

Endler, N. S., & Parker, J. D. (1990). Multidimensional assessment of coping: A critical evaluation. *Journal of Personality* and Social Psychology, 58(5), 844–854.

Felce, D., & Perry, J. (1995). Quality of life: Its definition and measurement. *Research in Developmental Disabilities*, 16(1), 51–74.

Green, M. & Elliott, M. (2009). Religious, health and psychological well-being. Journal of Religious Health, 49, 149-163.

Huppert, Felicia. (2009). Psychological Well-Being: Evidence Regarding Its Causes and Consequences. *Applied Psychology: Health and Well-Being*. 1. 137 - 164. 10.1111/j.1758-0854.2009.01008.x.

Jahoda, M. (1958). Current concepts of positive mental health. *Joint Commission on Mental Illness and Health*. New York: Basic Books

Lazarus, R. S. (1993). From psychological stress to the emotions: A history of changing outlooks. *Annual Review of Psychology*, 44, 1–21.

Lazarus RS, Folkman S. (19840. Stress, appraisal, and coping. New York: Springer.

Lazarus, R. S., & Lazarus, B. N. (2006). Coping with aging. New York: Oxford University Press

Maslow, A. H. (1968). Toward a psychology of being (2nd ed.). New York: Van Nostrand.

Maslow, A. H. (1971). The farther reaches of human nature. New York: Viking Press

Murray-Harvey, Rosalind & Slee, Phillip & Lawson, Michael & Silins, Halia & Banfield, Grant & Russell, Alan. (2000). Under Stress: The concerns and coping strategies of teacher education students. European Journal of Teacher Education - *EUR J TEACH EDUC*. 23. 19-35. 10.1080/713667267. Pollard, E. L., & Lee, P. D. (2003). Child well-being: A systematic review of the literature. *Social Indicators Research*, 61(1), 59–78.

Roth, S., & Cohen, L. J. (1986). Approach, avoidance, and coping with stress. American Psychologist, 41, 813-819.

Ryan, R. M., &Deci, E. L. (2000). Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being. *American Psychologist*, 55(1), 68–78.

Ryff, C. D., & Singer, B. (1996). Psychological well-being: Meaning, measurement, and implications for psychotherapy research. *Psychotherapy and Psychosomatics*, 65, 14–23.

Ryff, C. D., & Singer, B. (1998). The contours of positive human health. Psychological Inquiry, 9(1), 1-28.

Sagone, Elisabetta& De Caroli, Maria. (2014). A Correlational Study on Dispositional Resilience,

Psychological Well-being, and Coping Strategies in University Students. *American Journal of Educational Research*. 2. 463-471. 10.12691/education-2-7-5.

Schlosser, B.: 1990, 'The assessment of subjective well-being and its relationship to the stress process' *Journal of Personality Assessment*, 54, 128–140.

Seedhouse, D. (1995). "Well-being": Health promotion's red herring. Health Promotion International, 10(1), 61-67.

Shostrom, E. L. (1973). From abnormality to actualization. Psychotherapy, 10, 3640.

Taylor, C. (1989). Sources of the self: The making of the modern identity. Cambridge, MA: Harvard University Press.

Thoits, P. A. (1995). Stress, coping, and social support processes: Where are we? What next? *Journal of Health and Social Behavior*, 35, 53-79.

Vitaliano, Peter & Russo, Joan & Carr, John & Maiuro, Roland & Becker, Joseph. (1985). The Ways of Coping Checklist: Revision and Psychometric Properties. Multivariate Behavioral Research - MULTIVARIATE BEHAV RES. 20. 3-26. 10.1207/s15327906mbr2001_1.

Watson, David C., Sinha, Birenda (2008) Emotion regulation, coping, and psychological symptoms. International Journal of Stress Management, 15(3), 222-234