Coping styles, resources and subjective well being of school going adolescents

ABSTRACT

Adolescence is transitional phase of growth and development between childhood and adulthood. Adolescence can be a time of both disorientation and discovery. Coping as the cognitive and behavioural effort made to master, tolerance or reduce external and internal demands and conflicts among them. The dimensions of well-being those were focused and operationalized are: autonomy, environmental mastery, personal growth, positive relations with others, purpose in life and self-acceptance. The purpose of this study was to examine the relationship between coping styles and resources and subjective well being of school going adolescents. Socio demographic and clinical data sheet, Ways of Coping Ouestionnaire, Satisfaction With Life Scale were applied. Significant positive correlation was found in Subjective well being and Coping styles and resources in the sub-domains of Confrontive coping (r= .229, p<0.05) and very significant positive correlation was found in the sub-domains of Self Controlling(r= .379, p<0.01), Escape Avoidance (r= .345, p<0.01) and **Total Score** (r= .285, p<0.01) of the school going adolescents

Key words: Adolescence. Coping, Subjective wellbeing, Satisfaction

Introduction:

Adolescence (any person between ages 10 and 19) is an exciting and dynamic period for young people. It is transition from dependence to independent relationships with parents. Coping is viewed as an ongoing dynamic process that changes in response to Neha Roy*, ² Pradeep Kumar, ³ Dipanjan Bhattacharya Consultant Social Defence Division in National Institute of Defence under Ministry of Social Justice and Empowerment, Government of India, Delhi. ²Consultant Psychiatric Social Work, State Institute of Mental Health, Pt. B.D.S., PGIMS, (UHS) Rohtak, India.

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the changing demands of a stressful encounter or event. Coping is a goal-directed process in which the individual orients thoughts and behaviors toward the goals of resolving the source of stress and managing emotional reactions to stress (Lazarus, 1993). Two challenges are foremost in generating a definition of coping to guide research with children and adolescents. The first is the need for a definition that reflects the nature of developmental processes. It is unlikely that the basic characteristics or the efficacy of coping are the same for a young child as for an adolescent, and any definition of coping should reflect such changes. Second, it is important to distinguish coping from other aspects of the ways that individuals respond to stress, because the utility of any definition of coping depends in part on the degree of specificity that is conveyed (Lazarus & Folkman, 1984).

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Compass et al. (1988) examined the capacities to generate alternative solutions to cope with stressful events and the strategies to cope with the interpersonal and academic stressors in a simple of junior high school age youngsters. Subjects were moderately consistent in the generation and use of problem and emotion –focused coping with the two types of events and they adjusted the number of problem-focused alternative solutions they generated to match their appraisals of the controllability of the cause of interpersonal stressors (the number of alternative solutions generated and strategies used for interpersonal stressors was related to both selfreports and material reports of internalizing and externalizing emotional / behavioural problems). Specifically, the problem-focuses that the alternatives generated and the strategies used were negatively related to emotional / behavioural problems. Coping with academic stress was not related to emotional / behavioural problems. Self-reported emotional / behavioural problems varied as a function of the match between perceived control and other coping strategies.

Coping is not a trait but a complex amalgam of thoughts and behaviours. A number of gender differences in coping styles were revealed (Fahs, 1987). Claes (1992) evaluated the friendship network, the expectation and level of intimacy with friends as well as the presence of conflict with friends and personal adjustment in adolescents of 12 to 18 years. Results indicated that the number of friends in the network was not significantly correlated with the personal adjustment variables. Cohen & Wills (1985) conducted a study on "Stress, Social Support, and the Buffering Hypothesis". Evidence for a buffering model is found when the social support measure assesses the perceived availability of interpersonal resources that are responsive to the needs elicited by stressful events. Evidence for a main effect model is found when the support measure assesses a person's degree of integration in a large social network. Both conceptualizations of social support are correct in some respects, but each represents a different process

through which social support may affect well-being. In another study by Ben-Zur (2003) on "Happy Adolescents: The Link Between Subjective Well-Being, Internal Resources, and Parental Factors", the research investigates the associations of personal and parental factors with subjective well-being (SWB) in adolescents on the basis of 2 studies. Correlations and hierarchical regression analyses showed mastery and optimism to be negatively associated with negative affect (NA) and positively associated with positive affect (PA). Demographic variables did not relate to PA and NA except for gender, with female adolescents showing higher levels of NA than males.

Aim Of The Study

The purpose of this study was to assess the socio demographic correlate among the adolescence and the relationship between coping styles and resources and subjective well being of school going adolescents.

Methodology

Venue:

Data was taken from Senior Secondary Schools (3 schools) of the city of Ranchi. They were:

- i. Cambrian Public School, Ranchi
- ii. DAV Public School, Gandhinagar, Ranchi
- iii. International Public School, Ranchi

Research Design:

The study was cross-sectional school based study.

Sampling Technique and Sample: Purposive sampling was used for the study. Total sample size of the study were 120 school going adolescents of Class X (7 boys &7 girls), Class XI (7 boys &7 girls) and Class XII (7 boys &7 girls) of each of the 2 schools (i.e Cambrian Public School, Ranchi & DAV Public School, Gandhinagar, Ranchi) and school going adolescents of Class X (6 boys & 6 girls), Class XI (6 boys &6 girls) and Class XII (6 boys & 6 girls) of International Public School, Ranchi.

Inclusion Criteria: (i)Permission from school authority (ii)Students studying in 10th, 11th& 12th standard (iii) Both girls and boys (iv)Students in the age range of 14-18 years who were attending school regularly (v)Students who were willing to participate in the study. (vi)Students who gave their written consent (vii)Any of the parent/guardian who gave informed consent.

Exclusion Criteria: (i)Students who were not staying with their biological parents. (ii) Students who went to work after school. (iii)History of any significant physical illness (iv)History of any significant psychiatric and neurological disorders.

Tools Used For Data Collection

1. Socio- demographic clinical data sheet:It included various socio-demographic variables like name, father's name, address, age, sex, education, name of the school in which studying, domicile, religion, family type,total family members, family income per month, physical health, family history of physical illness, family history of psychiatric illness, education of father, education of mother, occupation of father, occupation of mother, student's academic performance, interaction with teachers and their various interests.

2. Ways of Coping Questionnaire(Folkman & Lazarus, 1978):

Way of coping questionnaire was developed by Folkman and Lazarus, 1978. The ways of coping questionnaire is designed to identify the thoughts and actions an individual's has used to cope with a specific stressful encounter. It measures coping processes, not coping disposition or styles. To assess coping styles with the instrument, the investigator would need to assess an individual's coping processes in a range of stressful encounters, then evaluate consistencies in those processes across encounters. Ways of coping is likert type 4 point scale. In scale o indicates "does not apply / not used",1 indicates "used somewhat", 2 indicates "used quite a bit", and 3 indicates "used a great deal". Inter-correlation of

all domains has shown relatively significant. Factor loading of the scale range from 0.25 to 0.79.

Domains of Ways of coping:

- Confronting coping
- Distancing
- Self controlling
- Seeking social support
- Accepting responsibility
- Escape avoidance
- Planful problem solving
- Positive Reappraisal

3. Satisfaction with Life Scale (Diener etal., 1985):

Among the various components of subjective well-being, the SWLS is narrowly focused to assess global life satisfaction and does not tap related constructs such as positive affect or loneliness. The SWLS is shown to have favourable psychometric properties, including high internal consistency and high temporal reliability. Scores on the SWLS correlate moderately to highly with other measures of subjective well-being, and correlate predictably with specific personality characteristics. It is noted that the SWLS is suited for use with different age groups. The scale is designed around the idea that one that one must ask subjects for an overall judgment of their life in order to measure the concept of life satisfaction.[15]

Procedure For Data Collection

Students meeting the inclusion and exclusion criteria were evaluated in detail on the socio-demographic data made for the study. All the students were further evaluated on Emotional Maturity Scale, Ways of Coping Questionnaire, Educational Aspiration Scale, Interpersonal Communication Inventory Scale and Satisfaction with Life Scale.

Statistical Analysis

The Statistical Package for Social Sciences (SPSS) 20.0 for windows was used for data analysis. Student t- test was used for comparing the continuous data of the 2 groups. ANOVA (Analysis of Variance) was used to compare continuous data of the 3 groups. Chi-square test was applied to compare the categorical data. Pearson's correlation analysis was used for finding out the significant correlations between variables.

TABLE 1:(A) Socio-demographic Characteristics of School Going Adolescents (Categorical data)

		Class X	Class XI	Class XII			
Variables		N = 40	N = 40	N = 40	x2	36	_
		n(%)	n(%)	n(%)	XZ	df	P
Sex	Male	20 (50%)	20 (50%)	20 (50%)	.000	2	1.000
	Female	20 (50%)	20 (50%)	20 (50%)		_	1.000
Religion	Hindu	35 (87.5%)	38 (95%)	38 (95%)	2.162	2	.504
	Others	5 (12.5%)	2 (5%)	2 (5%)			
Domicile	Urban	31 (77.5%)	28 (70%)	31 (77.5%)	.800	2	.775
	Semi-Urban	9 (22.5%)	12 (30%)	9 (22.5%)			
Family Type	Nuclear	25 (62.5%)	23 (57.5%)	23 (57.5%)	.276	2	.919
	Joint	15 (37.5%)	17 (42.5%)	17 (42.5%)			
Physical Health	Good	37 (92.5%)	38 (95%)	38 (95%)	.303	2	1.000
	Average	3 (7.5%)	2 (5%)	2 (5%)			
Family History of Physical Illness	Present	6 (15%)	2 (5%)	3 (7.5%)	2.602	2	.378
	Absent	34 (85%)	38 (95%)	37 (92.5%)			
Family History of Psychiatric Illness	Present	0 (0%)	0 (0%)	1 (2.5%)	2.017	2	1.000
	Absent	40 (100%)	40 (100%)	39 (97.5%)			
	Unskilled	1 (2.5%)	6 (15%)	5 (12.5%)			
Occupation of Father	Semi-skilled	2 (5%)	3 (7.5%)	1 (2.5%)	5.029	4	.307
	Skilled	37 (92.5%)	31 (77.5%)	34 (85%)			
Occupation of Mother	Unskilled	1 (2.5%)	1 (2.5%)	1 (2.5%)	.000	2	1.000
	Semi-skilled	39 (97.5%)	39 (97.5%)	39 (97.5%)			
Name of the Schools	DAVGandhinagar	14 (35%)	14 (35%)	14(35%)			
	Cambrian School	14 (35%)	14 (35%)	14 (35%)	.000	4	1.000
	International	12 (30%)	12 (30%)	12 (30%)			

Table 1. (A) shows the socio-demographic details of students in Class X, Class XI & Class XII. There were equal numbers of male and female students in Class X. Large number of them were Hindu (87.5%), urban (77.5%), coming from Nuclear family (62.5%) and had good physical health (92.5%). They had no family history of physical illness (85%) and psychiatric illness (100%). Father worked as skilled worker (92.5%) and the mothers were semi-skilled (97.5%). On comparison with students of Class XI and Class XII, it appeared that the socio-demographic characteristics were similar. There were no differences.

TABLE 1:(B) Socio-demographic Characteristics of School Going Adolescents (Continuous data)

Variables	Class X Mean±SD N=40	Class XI Mean±SD N=40	Class XII Mean±SD N=40	f(df=2)	P
Age (in years)	15.22±0.42	16.25±0.54	17.25±0.49	171.50	.001***
Family Income (per month)	41125.0±19463.55	29125.00±13769.50	31625.00±15582.18	5.92	.004***
Total no. of Family Members	6.67±2.88	7.32±3.70	6.20±2.51	1.34	.264
Education of Father (in yrs)	14.52±2.12	14.67±2.40	14.15±2.10	.59	.552
Education of Mother (in yrs)	12.67±2.51	12.07±2.89	11.82±2.64	1.05	.352

Significant level <0.001***

Table 1. (B) shows the characteristics of age, family income, total number of family members, and education of father and mother of the students. The mean age of students studying in Class X, Class XI and Class XII who participated in the study was 15.22±0.42, 16.25±0.54 and 17.25±0.49 respectively. All the students belonged to middle income families. The family income of the students studying in Class X was significantly more compared to students in Class XI and XII (p<0.001). The mean total number of family members was 6.67±2.88, 7.32±3.70 and 6.20±2.51 which indicate that most of the students belonged to nuclear family. Parents of students from all the classes were modestly educated.

TABLE 2: Correlation between Coping Style and Resources and Subjective Well-being

	Domains	Subjective Well-being		
		(Pearson 'r' value)N=120		
S	Confrontive Coping	.229*		
COPING STYLE AND RESOURCES	Distancing	.132		
	Self Controlling	.379**		
	Seeking Social Support	.121		
	Accepting Responsibility	.063		
	Escape Avoidance	.345**		
	Planful Problem Solving	.094		
	Positive Reaapraisal	.107		
	Total Score	.285**		
		,		

Significant level p<0.01**

Significant level p<0.05*

Table 2, shows correlation of coping style and resources with subjective well-being in students of Class X, XI and XII (N=120). Confrontive coping, self-controlling, escape avoidance and total score of coping style and resources have correlated significantly positive with subjective well-being. There was no relationship with distancing, seeking social support, accepting responsibility, planful problem solving and positive reappraisal with subjective well-being.

Discussion:

Socio-demographic variables

In the present study, demographic variables showed that the students groups were homogeneous, i.e., 50% were males and 50% females. In all three schools taken in the study were co-educational and the number of girls in those schools is sizeable in comparison to boys. In those schools mainly middle and upper-middle class students study and in those classes, girls are usually encouraged for education. Similar study was done earlier by White & Labouvie (1989) for enumerating the prevalence of substance addiction among school going adolescents. However, this study was carried out in Western Society, which has some resemblance to Urbanized Indian society like the present study. In that study 'gender' of the adolescents was not being emerged as major influencing factor for initiation and maintenance of addiction. In another study, Rose & Rudolph (2006) assessed the gender of the addicted adolescents on their peer relationship processes, behavioural and social- cognitive styles, stress and coping, and relationship provisions. They found, female-linked relationship processes may contribute to the development of intimate relationships and inhibit antisocial behaviour, yet may heighten vulnerability to emotional difficulties. Male-linked relationship processes may interfere with the development of intimate relationships and contribute to behavioural problems, yet may enhance the development of group-based relationships and protect against emotional difficulties. Therefore, equal representation from the either sex in the final samples of present study does have adequate justification.

The current study showed that the mean age of students studying in Class X, Class XI and Class XII who participated in the study was 15.22±0.42, 16.25±0.54 and 17.25±0.49 years respectively which showed significant difference. Similar studies were done before on the same population. Sallis et. al.,2000 conducted a study in which the population was ranging between 3-12 years for children and 13-

18 years for adolescents. Another study was conducted by Maji (2015) on "Psychological problems and coping style among bullied school students" in which the population ranges between 12-18 years. Result showed that there is difference in the age because the study was done on different age groups and the standard of education of the students.

In the present study, there was no significant difference found in terms of religion. It was found that large number of them belonged to Hindu religion. One of the reasons for this result may be the religious distribution of the locality which is Hindu dominated area. As per 2011 Census of India, Hinduism is the major religion in the state with 67.8% adherents followed by Islam (14.5%) and Christianity (4.3%). Other religions constitute 12.8% of state population, which is primarily Sarnaism. The total population of Jharkhand is 3.2 crore, of which Hindus are 2.2 crore (67.8%). Similar study was conducted in CIP, Ranchi on "The relationship between Parenting Style, Emotional Intelligence and Self-efficacy Among School Going Adolescents". Findings suggested that 78.6% of the students belonged to Hindu religion, whereas remaining 9.5% were from Muslim, 9.5% were Christian and 2.4% belonged to other religion (Fathima, 2013) which is similar to the present study. In early 1980s, the Union Government tried to collect basic data about the status of education among Muslims and other weaker sections in the educational institutions. Out of the more than 1.1 billion Indian populations, about 19% are religious minority communities, Muslims (13.5%), Christians (2.75%), Sikhs (1.75%), Buddhists (0.75%), Parsis and other religious communities (0.25%) compose the religious minority of the country. A significant proportion of these people are socially, economically and educationally backward. The Sixth Annual Report (1983-84) of the Central Minorities Commission confirms the backwardness of the Muslims. It states that out of 172 districts of the country identified as backward by the Planning Commission, 39 districts, including, seven classified as most backward have a sizeable Muslim population.

The Sachar Committee Report, have pointed out, Muslims are among the most economically, educationally and socially backward sections of Indian society. More than half of the total Muslim Indian Population i.e., 53.95 per cent is illiterate with 17.48 per cent literate people just for the namesake only. Apart from it, 21.18 per cent people have completed their primary education only, whereas, the percent share of secondary literates among the Muslims is only 7.44 per cent. The Muslims with technical and non-technical diploma courses are only 0.19 per cent and in the higher studies, their share is only 1.728 per cent (Khan & Butool, 2013). Among major religious groups, the literacy rate of the Jain population was the highest at 94.1 per cent, followed by the Christians at 80.3 per cent and the Buddhists at 72.7 per cent. The literacy rate among the Hindus (65.1 per cent) was slightly higher than the national average (64.8 per cent) but lower than that of the Jains, the Christians, the Buddhists and the Sikhs. A high proportion of the Hindu population (30.6 per cent) was concentrated in the states of Uttar Pradesh, Bihar and Rajasthan and these states were poor on the socio-economic front. Muslims have lower literacy rate than the Hindus. The reasons usually suggested for the educational backwardness of Indian Muslims could be broadly grouped under three main heads: (i) religious traditionalism and backwardness of those professing Islam, (ii) partition of India and the psychological crisis of identity it created for Indian Muslims, and (iii) the deliberate neglect and discrimination against the Muslims by the majority (Hindu) society which professed to be secular but was, in fact, discriminatory whether in education or employment (Kamat, 1981). Over 70 per cent of the Muslims in India are living in rural areas and are marginal and small farmers or self-employed artisans and of the remaining 30 per cent who are living in the towns roughly 80 to 85 per cent are skilled workers, tailors, retailers and in such other professions which do not require a person to be literate (Saxena, 1983). Therefore, the findings describing the representation of religious groups in the selected participants of the present study can be said to be justified if we go through those demographic and cultural observations minutely.

In the present study, most of the selected students were coming from urban area and it was found that they belonged to Nuclear family. This result can be explained by the reality of the effects of industrialization and urbanization and the transformation of traditional Indian joint family system into the present nuclear family system. This can is similar in the study conducted by Fathima (2013) in which more than half of the respondents belonged to nuclear family i.e. 60.7% rather than joint family i.e. 39.3%. It is found that careful perusal of the family literature in India dispels the belief that the Indian family was basically joint, and that following industrialisation and urbanisation, the nuclear family replaced it (D'Cruz & Bharat, 2001).

The current study showed that the family income of the students studying in Class X was significantly more as compared to the students in Class XI or Class XII. This might be explained as a situational fact or artifact or by chance factor. It cannot be generalized. Also, it might be an exaggerated fact shared by the students of Class X as they thought that it can act to their social image. However, students of Class XII are more mature and they are about to join the professional decision. So, they shared accurate information as compared to Class X students.

In the present study, large number of adolescents reported to have good physical health. This can be explained as all the adolescents belonged to middle socio-economic status where their materialistic needs were fulfilled by their family members like adequate nutrition, accessibility of medicinal substances and medical aids and they are able to take adequate sleep and rest work capacity as their family environment were congenial. (Nuru-Jeter et al., 2010; Repetti et al., 2002). Good health begins early in life. In the first years of childhood, the family is charged with responsibilities for the care and development of the child. In healthy families, children learn that they can count on the environment to provide for their emotional security and their physical safety and well-being, and they acquire behaviors that will eventually allow them to maintain their own physical and emotional health independent of caregivers. Poor health also begins early in life. Research consistently suggests that families characterized by certain qualities have damaging outcomes for mental and physical health. These characteristics include overt family conflict, manifested in recurrent episodes of anger and aggression, and deficient nurturing, especially family relationships that are cold, unsupportive, and neglectful (Force, 1996).

In the present study, it is found that large number of students had no family history of physical illness or psychiatric illness. Anger and aggression are highly noxious agents in a family environment. Conditions ranging from living with irritable and quarrelling parents to being exposed to violence and abuse at home show associations with mental and physical health problems in childhood, with lasting effects into the adult years. It might be because of low level of stress among family members. According to McEwen (1998), chronic stress negatively affects the person's mental health as well as physical health. In current study most of the family belongs to middle socio-economic status which bears steady and sound family income and well to do family functioning which may lead to low level of burden and stress among family members. So this might be a reason for above finding. However many studies have shown a link between stress and mental health problems but the reason behind this connection has remained unclear.

In this study, it was seen that large number of student's father worked as skilled worker and mothers were semi-skilled (House wife), however both the parents of students from all the classes were modestly educated. Although the education rate is currently growing high but still there is a cultural hesitation and limited boundary for females working outside in a city like Ranchi in India. According to Hindu law giver Manu: "Women are supposed to be in the custody of their father before marriage, husband when married and under the custody of her son in old age or as widows. In no circumstances she should be allowed to assert herself independently". The above described position of women as per Manu is still the case in present modern day social structure in India, barring few exceptions here and there. Women are not only getting unequal pay for equal or more work but also they are being offered only low skill jobs for which lower wages are paid. This has become a major form of inequality on the basis of gender (Kumbhare, 2009). So we can arrive at a conclusion that the male populations in Indian context are the main source of income in the family whereas females stay at home for the work which is assigned to them. So this might be a reason for the above finding.

Relationship of Coping Style and Resources and Subjective Well-being

Coping strategies play an important role in the psychosocial adjustment of school going adolescents. Presence of adversities and developmental challenges that may affect adolescents in various ways, it resists conceiving of the developmental process mainly as an effort to overcome deficits and risk. Instead, it begins with a vision of a fully able child eager to explore the world, gain competence, and acquire the capacity to contribute importantly to the world. Negative coping has a negative association with both positive self-worth and subjective well-being. Feelings of positive self-worth were found to be positively associated with subjective well-being. In addition, positive coping appears to influence subjective well-being positively by first increasing feelings of positive self-worth (Saha, et al., 2014).

In the present study, significant positive correlation was found in Subjective well being and Coping styles and resources in the sub-domains of Confrontive coping (r= .229, p<0.05) and very significant positive correlation was found in the sub-domains of **Self Controlling**(r= .379, p<0.01), Escape Avoidance (r= .345, p<0.01) and Total Score (r= .285, p<0.01) of the school going adolescents.Past research suggests that the factor 'resiliency' enables many young people to thrive in the face of any adversity (Werner, 1982). Every child possesses the potential to develop resiliency. Resilience is simply one of a cluster of adaptive response patterns that can be learned by anyone during childhood. Associated with resilience are persistence, hopefulness, hardiness, goal directedness, healthy expectations, success orientation, achievement motivation, educational aspirations, a belief in the future, a sense of anticipation, a sense of purpose, and a sense of coherence could infuse the strength of character and better coping abilities to adolescents (Benard, 1991).

Smedema et al (2010) studied the relationship between various coping-related variables and the evaluation of self-worth and subjective well-being of some adults. They found that Quality of life and Life satisfaction were indicators of Subjective well-being. The results of the study indicated that negative coping has a negative association with both positive self-worth and subjective well-being.

Feelings of positive self-worth were found to be positively associated with subjective well-being. Subjective well-being comprises people's longer-term levels of pleasant affect, lack of unpleasant affect, and life satisfaction. It displays moderately high levels of cross-situational consistency and temporal stability. Things like strengths of character, indulgence to positive coping and problem-solving measures and positive experiences such as a satisfied lifeare among the central concerns of positive psychology (Snyder & McCullough, 2000; Seligman, 2002).

Factors like character strengths and coping resources are reflected in thoughts, feelings, and behaviours of people. They existin degrees and can be measured as individual differences. Individuals possessing higher level of positively oriented coping and problemsolving measures would likely to view situations more positively and could also remain calm and composed at the time of adversities and because of their qualities they can extract positive things from the generally held hopeless and pressing situations. Because of these qualities, they tend to enjoy better quality of life and subjective well-being than those individuals who do not have those skills and characteristics (Furr & Funder, 1998; Alex et al., 2006).

LIMITATIONS: Though a sincere effort has taken for conducting the study and minimising the errors, there are certain limitations of the study. Sample size of the present study was 120. The greater number of samples could have better outcome. The samples were selected by using purposive sampling technique. The study group was selected from 3 schools. The greater number of schools could have

given better outcome in the field of research. Study group was selected from the schools which belonged to urban areas. Another group could have been selected from any of the schools which belonged to rural area for a comparative study.

Future Directions: Now, by taking the account of the whole limitations and difficulties while doing the study, I would like to put some suggestions for doing a better study in the area. A findings suggest that adolescent's subjective well-being is associated with adolescent's emotional maturity or in other way, we can say that adolescent's subjective well-being can be enhanced by developing different strategies (related to mental health) to enhance adolescent's emotional maturity (Roy et al 2021).

Future studies should aim to include a greater number of samples which may help to get more generalizable findings. There may be some influences of the sociodemographic variables like socio-economic status, type of family, family size etc. on emotional maturity, coping styles and interpersonal communication skills in the chosen populations. Future studies can focus in these areas.

Conclusion: Most of the selected students were coming from urban area and it was found that they belonged to Nuclear family. There were significant correlation was found between subjective well-being with coping style and resources total score and its domains of confronted coping, self-controlling and escape avoidance. These findings will help the mental health professionals to address adolescent's psychosocial issues by incorporating these components in school mental health programmes. Also, this finding will help the mental health professionals to develop effective program to enhance the emotional maturity of adolescents as well as the strategies regarding coping style and resources.

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