



RELATIONSHIP BETWEEN SELF-ESTEEM, COPING AND PSYCHOLOGICAL WELL-BEING AMONG COLLEGE STUDENTS

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ABSTRACT

The present work explored the relationship between self-esteem, coping and psychological well-being among college students. The sample comprised 80 adults (40 male, 40 female) with age range from 18 to 25 were taken from University College, Kurukshetra. The measures of Psychological Well-Being Scale (Dr. Devendra Singh Sisodia and Ms. PoojaChaudhary, 2012), Coping Checklist (Chadda, Singh and Ganguly, 2007) and Rosenberg's Scale of Self-Esteem (Rosenberg, 1965) were used to assess the participants. The measures of psychological well-being correlated positively with the measure of coping i.e. STF (.52, $p < .01$), EFI (.45, $p < .01$), SOC (.55, $p < .01$), MTL (.48, $p < .01$), INT (.49, $p < .01$) and SMPWB (.67, $p < .01$). All three correlations are significant at or above .05 levels of significance. The major finding of the study indicates that there is a positive relationship between self-esteem and coping with psychological well-being. The measures of psychological well-being correlated positively with self-esteem i.e. STF (.48, $p < .01$), EFI (.60, $p < .01$), SOC (.40, $p < .05$), MTL (.44, $p < .01$), INT (.43, $p < .01$) and SMPWB (.60, $p < .01$). These results may be interpreted as individuals having proud feeling toward, positive attitude, satisfaction with self and self-respect will be better psychological well-being.

Keywords: *psychological well-being, self-esteem, coping strategy.*

Introduction

Psychological well-being is one of the essential concepts being today taken into consideration. According to Ryff (1989) has defined psychological wellbeing consists of 6 factors; autonomy, environmental mastery, personal

growth, positive relation with others, purpose in life and self-acceptance. "Psychological Well-being refers to the simple notion of a person's welfare, happiness, advantages, interests, utility, and quality of life" (Burriss et al., 2009).

Psychological well-being not merely is important at university career but is a matter of great importance for all periods of life.

Lawten (1991) states that psychological well-being is the base for quality of life, as it could act as an investigative criterion for personal merit and quality perceived in any aspects of daily life. Gender, age, culture, social class, success, major, and religion are of the factors influencing level of psychological well-being.

Psychological well-being is a multi-dimensional concept; optimism, self-control, happiness, sense of interests, free of failures, anxiety and loneliness have been considered as the special aspects of well-being (Sinha & Verma, 1992). McCulloch (1991) shows that positive mood, positive emotions and social support play basic role in constructing psychological well-being. Gasper (2003) showed that happy moods could facilitate the ability of thinking for solving problems in new methods but negative feelings may stop the ability of flexible thinking.

Ryff (1989; 1991), regarding his previous studies on happily-living and happiness and due to the positive performance of human, determines six positive aspects for psychological performance or psychological well-being as following:

1. Self-acceptance: Those with self-esteem, self-multilateral acceptance including both nice and unsuitable qualities; such people have got optimistic and positive feelings about their lives in the past.
2. Positive relations: Those with friendly, pleasant and trustworthy relations, concerned with the others' peace and comfort, able to stay in unanimity and companionship, and perceiving human relationship during interactions.
3. Autonomy: Those feeling dominance and efficiency to manage them; self-confidence and organization are of their characteristics; they show independence in recognizing their beliefs and resist towards social stresses.
4. Environmental mastery: Those with feelings of superiority in environment and able to handle environment and/or environmental changes and make effective use of chances.
5. Purpose in life and Personal growth: this group totally includes those following some purposes in life, their feelings and actions are programmed and directed, the realists with self-confidence who are able to select or create suitable circumstances deserving to their personal needs and values.

Self-esteem can be defined as an individual's judgment of his or herself-worth (Rosenberg 1965). Self-esteem is generally considered the evaluative component of the self-concept, a broader representation of the self that includes cognitive and behavioral aspects as well as evaluative or affective ones (Tomaka & Blascovich, 1991). While the construct is most often used to refer to a global sense of self-worth, narrower concepts such as self-confidence or

body-esteem are used to imply a sense of self-esteem in more specific domains. It is also widely assumed that self-esteem functions as a trait, that is, it is stable across time within individuals.

Self-esteem is a positive or negative orientation toward oneself; an overall evaluation and sense of one's worth or value. It is also defined as confidence, self-respect, satisfaction and conditional form of acceptance. Leung, Chenug & Liu (2011) indicated that the persons who are involved in meaningful and purposeful activities become more healthier by the time because these meaningful activities involve social involvement of the individual which is associated with the spiritual well-being and enhanced self-esteem. DeBord (2009) also explains self-esteem as how an individual feels about himself. Individuals who have high self-esteem are much keen for personal growth and development (Owens, Sheldon, & Goodman, 2001).

Coping refers to conscious or unconscious strategies used to reduce unpleasant emotions. Coping has also been described as constantly changing cognitive and behavioral effort to manage specific demands (internal or external) that reappraised as taxing or exceeding the resources of a person (Folkman & Lazarus, 1988). Managing stress is all about taking charge of thoughts, emotions, schedule, environment, and the way one deal with problems. Psychologists have identified two major ways in which people cope with stress. In the first approach, a person may decide to suffer or deny the experienced stress, this is the passive approach. In the active approach a person may decide to face the realities of experienced stress and clarify the problem through negotiations with other members.

On the bases of previous researches (Folkman & Lazarus, 1985; Folkman, et al., 1986; Folkman, et al., 1987), Folkman and Lazarus (1988a) categorized the coping strategies in eight types that depict a broad range of cognitive and behavioral strategies people used to deal with the stressful events. These categories were further grouped into two forms (a) problem-focused, and (b) emotion-focused.

Problem-focused strategies include categories of confrontive coping and planful problem solving. The remaining six categories are emotion-focused strategies including distancing, accepting responsibility, escape-avoidance, seeking social support, and positive reappraisal. Problem solving approaches might take the form of seeking information, trying to get help, inhibiting action, and taking direct action. On the other hand, the emotion-focused approaches include trying to see humor in the situation, avoidance, detachment, and assignment of blame to self and others. When evaluating problem- and emotion-focused coping, value judgments associated with use of emotion-focused coping have been unfavorable toward women (Sherif, 1987).

Ender and Parker (1990) also identified three types of coping strategies:

1. Task-oriented Strategy involves obtaining information about the stressful situation and about alternative courses of action and their probable outcome.
2. Emotion-oriented Strategy involves efforts to maintain hope and to control one's emotions; it can also involve venting feelings of anger and frustration, or deciding that nothing can be done to change things.

3. Avoidance-oriented Strategy involves denying or minimizing the seriousness of the situation; it also involves conscious suppression of stressful thoughts and their replacement by self-protective thoughts.

Previous studies suggested that problem-focused coping strategies are associated with psychological health, whereas emotional and avoidance coping strategies are associated with perceived stress (Jeyaraj, J. et al., 2018); Sonika, et al., 2019), personality traits (Jaiswal, A. et al., 2023) and academic stress and mental well-being (Laldikpuii, J. &Vijayan, D., 2023).

Shi et al. (2017) examined the impact of family function and family-related factors, such as being an only child, grand parenting, income, and family relationship on the self-esteem in college students who were in the transitional period from late adolescence to emerging adulthood. Bansal, A. (2016) found out the positive correlation between the family environment and self-esteem of adolescents.

Hudda et al. (2000) reported that Individuals with low self-esteem may feel unhappy and dissatisfied. Psychological wellbeing is positively correlated with self-esteem (Fernandes et al., 2008; Valkenburg, et al., 2006). Psychological well-being is directly associated with the kind and number of roles an individual occupies which determines an individual self-esteem (DeBord, 2009). Paralkar et al., 2023 examined how ambiguity and uncertainty tolerance relate to academic stress coping in undergraduate students. Findings suggest that intolerance of ambiguity is a stronger predictor of both approach and avoidance coping strategies compared to intolerance of uncertainty. These insights can inform vocational and mental health counselling for college students.

The present study is designed to explore the relationship between self-esteem and coping with psychological well-being among college students. The review of literature reveals that though there are studies available in the area yet there is paucity of research, particularly on the selected sample by taking all variable together. The present study is an attempt in this direction to widening the area of research.

Objectives of the study:

1. To examine the relationship between self-esteem and psychological well-being.
2. To examine the relationship between coping and psychological well-being.

Hypotheses:

1. Self-esteem will correlate positively with psychological well-being.
2. Problem focused coping will correlate positively with psychological well-being.

METHOD:-**Sample**

For present study a sample of college students was taken from University College, Kurukshetra. Participation of the subjects in the present study was voluntary and informed consents were obtained from all the subjects included in the study. The age range of subjects was between 18 to 25 years. Both male and female participant were included in the sample. 80 students (40 male and 40 female) were selected. Data were gathered from Kaithal, Kurukshetra, Karnal and Ambala districts of Haryana. They were selected for the present study on the basis of availability. All the students included in the study were regular students in their relative institutions. The majority of the participants were belongs to middle socio-economic status. The overall health of the participants was good and free from any kind of ailment.

MEASURES**PSYCHOLOGICAL WELL-BEING SCALE – (Dr. Devendra Singh Sisodia and Ms. PoojaChaudhary, 2012)**

The psychological well-being scale used in present study is developed by Dr. Devendra Singh Sisodia and Ms. PoojaChaudhary(2012), Udaipur. To measure the psychological well-being of the participant, Psychological Well-being Scale was used. This scale was developed by using the Likert technique. Suggestions were invited from experts from different fields such as Psychology, Sociology, Human Development, Family Relations, and Psychiatry. The final form of scale was thus prepared comprising of 50 statements with a view to measure several aspects of Well-being like Satisfaction, Efficiency, Sociability, Mental Health and Interpersonal Relations.

All 50 statements are in positive manner. A total of 5 marks to strongly agree, 4 marks to agree, 3 marks to undecided, 2 marks to disagree, and 1 mark to strongly disagree responses are assigned. The sum of marks is obtained for the entire scale. The higher the score more is the well-being. Area-wise and total, both scoring can be done. Area-wise scores indicate the level of psychological well-being, 10-12, 12-16, 16-43, 43-48, and 48-50 showed very low, low, moderate high, and very high. The reliability of the scale was determined by test retest method and internal consistency method. The validity of the scale was 0.87 and consistency value for the scale was 0.90. The scale was validated against the external criteria and coefficient obtained was 0.94.

COPING CHECKLIST – (Chadda, Singh and Ganguly, 2007): Coping strategies used by the participants were assessed by the Ways of Coping Checklist-Hindi Adaptation (WCC-HA) by Chadda, Singh and Ganguly, 2007). The checklist consists of 13 items with three groups of coping strategies i.e. problem focused (3 items), seek social support (4 items) and avoidance (6 items). The WCC-HA has been adapted from the Ways of Coping Checklist of Folkman and Lazarus (1985). The original instrument has 28 items, each item rated on a five point likert scale from 'never' to 'always'. The version of the checklist was translated to Hindi and tested in 30 caregivers for its suitability

in the local population. This checklist assess the coping strategies and checklist refers to three categories of coping strategies i.e. problem focused, seek social support and avoidance.

ROSENBERG'S SCALE OF SELF-ESTEEM – (Rosenberg, 1965): Rosenberg's Scale of Self Esteem (Rosenberg, 1965), is a 10-item measure that assess the level of self-esteem. The Rosenberg Self-Esteem Scale (RSES; Rosenberg 1965) has five positive descriptions and five negative descriptions. The Rosenberg Self-Esteem Scale was rated on a 4-point Likert scale ranging from 1 (strongly disagree) to 4 (strongly agree). Items 2, 5, 6, 8, 9 are reverse scored. Higher scores indicate higher self-esteem. The researcher reverse scored five items that were negative in nature so that higher scores would indicate higher level of self-esteem. The scale ranges from 0-30. Scores between 15 and 25 are within normal range; scores below 15 suggest low self-esteem. People high in self-esteem claim to be more likable and attractive, to have better relationships, and to make better impressions on others than people with low self-esteem, but objective measures disconfirm most of these beliefs.

The RSE has displayed good reliability and discriminant validity (Harter, 1983; Wylie, 1974). Construct validity and temporal stability (test-retest correlation $r = 0.84$) and Internal consistency was also demonstrated by the results of the present study (alpha is .85) (Vallières & Vallerand, 1990).

STATISTICAL ANALYSIS

The obtained data analyzed by SPSS using appropriate statistical techniques. Pearson correlation was applied to explore relationship between self-esteem, coping and psychological well-being among college students.

CORRELATION AMONG MEASURES

Correlations for all studied variables are presented in Table-1; Pearson Correlation shows that self-esteem and coping are found to be significantly related to psychological well-being are ranging from .02 to .67. All three correlations are significant at or above .05 levels of significance.

CORRELATIONAL TABLE-1

	STF	EFI	SOC	MTL	INT	SMPWB
PF	.52	.45	.55	.48	.49	.67
SS	.07	.05	-.03	.02	-.10	.02
AVD	-.06	-.05	-.09	-.05	-.21	-.10

ESM	.48	.60	.40	.44	.43	.60
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The measures of psychological well-being correlated positively with the measure of coping i.e. STF (.52, $p < .01$), EFI (.45, $p < .01$), SOC (.55, $p < .01$), MTL (.48, $p < .01$), INT (.49, $p < .01$) and SMPWB (.67, $p < .01$). Thus, the result may be interpreted as individuals having the tendency to solve the problems will be better psychological well-being. Similar findings reported as relationship between the relationships between well-being and coping strategies (Vitalino et al. 1985; Kappe & van der Flier, 2012).

The measures of psychological well-being correlated positively with self-esteem i.e. STF (.48, $p < .01$), EFI (.60, $p < .01$), SOC (.40, $p < .05$), MTL (.44, $p < .01$), INT (.43, $p < .01$) and SMPWB (.60, $p < .01$). These results may be interpreted as individuals having proud feeling toward, positive attitude, satisfaction with self and self-respect will be better psychological well-being. Similar results reported as relationship between well-being and self-esteem during this period of life (Sweeting & West, 2003; Birndorf et al., 2005).

CONCLUSION

The main objective of present work is to examine the associations between self-esteem, coping strategy and psychological well-being among college students. The present findings show significant associations between these variables and explore these associations. Specifically, problem focused coping is associated with positive scores for psychological well-being. Our findings should be considered by policy makers, family counselors, psychologists, and social workers to improve psychological well-being of students by empowering their problem solving ways of coping instead of avoidance coping in stressful situations. In conclusion, without ample studies on students and their coping strategies and self-esteem, and the problems related to it will not be clear.

LIMITATIONS

This study has certain limitations that need to be considered when interpreting these data. First, consecutive sampling may result in a sampling bias. Second, we recruited our samples from one college, which may not be representative of the general population. Third, our sample size was relatively small, so larger and longer-term follow-up studies with students are needed in the future to better understand the self-esteem, coping and psychological well-being among college students.

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