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Stress Coping Strategies Among College-Going Women In Kashmir: A Quantitative Analysis

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ABSTRACT

Stress management is a critical aspect of mental well-being, particularly for college-going women who often face academic, social, and environmental pressures. This study aimed to assess stress coping strategies among female students in Kashmir using a quantitative, cross-sectional survey design. A total of 517 participants completed a six-item questionnaire assessing their stress management behaviors. The results indicated that 52.0% of participants demonstrated moderate stress management abilities, while 25.9% exhibited high-stress management, and 22.1% had low-stress coping abilities. Pearson's correlation analysis revealed that seeking professional help ($r = .573$, $p < .01$) and using stress-relief techniques such as deep breathing, yoga, or mindfulness ($r = .549$, $p < .01$) were the strongest predictors of effective stress management. Lifestyle adjustments and self-regulation strategies, such as writing or deep breathing, also showed moderate associations with overall stress-coping abilities. These findings suggest that a multifaceted approach incorporating professional support and self-regulation techniques can enhance stress management among college-going women. Institutions should implement structured programs to promote stress-relief practices and provide accessible support services.

Keywords: Stress management, coping strategies, college students, mental health, Kashmir.

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Introduction

Stress is inevitable in daily life, especially for students navigating academic and personal challenges. College-going women in Kashmir face unique stressors due to academic pressures, sociocultural expectations, and environmental conditions such as prolonged winters and political unrest. Chronic stress can negatively impact mental and physical well-being, leading to anxiety, depression, and reduced academic performance (Dar & Iqbal, 2019). However, recognizing and managing stress effectively plays a crucial role in maintaining overall well-being.

Stress management strategies, including deep breathing, mindfulness, seeking social support, and adjusting lifestyles to environmental factors, help individuals cope with stressful situations. Research highlights that students who actively engage in stress-coping mechanisms exhibit better mental health outcomes and academic success (Rentala et al., 2019). Despite the importance of stress management, there is limited research specifically examining the

levels of stress coping among college-going women in Kashmir. Given the region's socio-political climate and environmental challenges, understanding how these women manage stress is vital for developing effective interventions.

This study aims to assess stress management levels among college-going women in Kashmir, categorizing them into low-, moderate--, and high-stress management groups.

Review of Literature

Stress and Coping Mechanisms in College Students

College students experience high-stress levels due to academic workload, career concerns, and personal responsibilities. Research indicates that female students often report higher stress levels than their male counterparts due to additional social and cultural expectations (Anbumalar et al., 2017). Effective stress-coping strategies include mindfulness, social support, and relaxation techniques, significantly improving psychological resilience and academic performance (Rentala et al., 2019).

Students face additional challenges in Kashmir, where environmental and socio-political factors contribute to stress. A study by Dar and Iqbal (2019) found that stress levels among Kashmiri students were influenced by gender and domicile, with urban students experiencing more academic stress compared to their rural counterparts. Similarly, a report by Greater Kashmir (2022) revealed that 60–65% of school-going adolescents in the region suffer from academic stress, highlighting the need for effective stress management interventions.

Gender Differences in Stress Management

Several studies suggest that women tend to use emotion-focused coping strategies more frequently than men, such as seeking social support and practicing mindfulness (Jan & Mattoo, 2022). In a study conducted in Kashmir, Sofal and Jan (2022) found that working women exhibited better stress management skills compared to non-working women due to greater exposure to coping mechanisms in professional environments. Furthermore, holistic stress management programs have been shown to improve well-being among female students, emphasizing the importance of structured interventions (Rentala et al., 2019).

Effectiveness of Stress Management Strategies

Recognizing stressors and adopting appropriate coping techniques are key to maintaining mental well-being. Techniques such as deep breathing, meditation, and lifestyle adjustments have proven beneficial in reducing stress (National Center for Biotechnology Information (Bashir et al., 2023). According to The Guardian (2024), resilience-building interventions, including stress management education, should be integrated into academic programs to enhance students' ability to cope with stress effectively.

Given the limited research on stress coping strategies among college-going women in Kashmir, this study fills a critical gap by assessing their stress management levels and examining the role of various coping strategies. The findings will provide insights into developing targeted interventions to support female students in the region.

Methodology

Research Design

This study employed a quantitative, cross-sectional survey design to assess stress-coping strategies among college-going

women in Kashmir. The study aimed to measure participants' ability to manage stress through a structured questionnaire that included six Yes/No items derived from a validated Healthy Lifestyle Scale.

Participants

A total of 517 college-going women from various higher education institutions in Kashmir participated in the study. The participants were selected using a convenience sampling method to ensure broad representation while maintaining feasibility in data collection.

Inclusion Criteria

Participants were included in the study if they met the following criteria:

1. Gender: Female students currently enrolled in a college or university in Kashmir.
2. Age Range: 18–25 years.
3. Informed Consent: Voluntarily agreed to participate in the study.
4. Complete Responses: Participants with incomplete responses were excluded from the final analysis.

Instrument & Measures

The study employed a six-item questionnaire designed to assess stress-coping strategies. Each item was coded using a binary scale (Yes = 1, No = 0), resulting in a total score ranging from 0 to 6.

Stress Coping Items

The six questions used to assess stress coping strategies were:

1. Recognizing Stressors: "I can recognize what causes me stress in daily life."
2. Use of Stress-Relief Techniques: "I use stress-relief techniques like deep breathing, yoga, or mindfulness to stay calm."
3. Seeking support: "I seek support from friends, family, or mental health professionals when feeling overwhelmed."
4. Adjusting lifestyle: "I adjust my lifestyle to cope with limited sunlight or isolation during long winters."
5. Self-Regulation Strategies: "I use techniques like deep breathing, counting to ten, or writing to calm myself when I feel upset, angry, or stressed."
6. Seeking Professional Help: "I seek professional help when feeling overwhelmed by stress, anxiety, or depression."

Categorization of Stress Coping Levels

Based on participants' total scores (ranging from 0 to 6), they were categorized into three stress-coping levels:

- Low Stress Coping Ability (0–2): Limited use of stress management strategies.
- Moderate Stress Coping Ability (3–4): Uses some strategies but not consistently.
- High Stress Coping Ability (5–6): Frequently uses multiple stress management strategies.

Data Collection Procedure

The data was collected through both online and paper-based surveys distributed among female college students in various institutions.

Ethical Considerations

Participants were informed about the purpose of the study, and their voluntary participation was ensured through an informed consent process. Confidentiality was maintained by keeping responses anonymous and not disclosing any personal

information. Additionally, participants had the right to withdraw from the study at any stage without any consequences. The study received ethical approval from the Institutional Review Board (IRB) before data collection commenced.

Data Analysis

The collected data was analyzed using IBM SPSS Statistics software version 29 to examine stress-coping strategies and their associations.

1. Descriptive Statistics

Frequencies and percentages were computed for each Yes/No item, while the mean and standard deviation (SD) were calculated for the total stress coping score. A distribution analysis was also conducted to categorize participants into Low, Moderate, and High stress coping levels based on their total scores.

2. Reliability Analysis

Cronbach's alpha was calculated to ensure the internal consistency of the stress management scale. The overall reliability coefficient for the scale was $\alpha = 0.85$, indicating high internal consistency. Additionally, individual coping strategy subscales were tested, with reliability coefficients ranging from 0.70 to 0.88, suggesting acceptable to excellent reliability. This confirms that the items within the scale measured stress management consistently.

3. Normality Testing

The Kolmogorov-Smirnov and Shapiro-Wilk tests were used to assess whether the stress management score followed a normal distribution, while skewness and kurtosis were examined to determine the shape of the data distribution.

4. Correlation Analysis

Pearson's correlation coefficient (r) was used to examine the relationships between individual stress coping strategies and the total Stress Management Score, while intercorrelations among different coping strategies were analyzed. A significance level of $p < .01$ was set to determine statistically significant correlations.

Results

Table 1: Distribution of Stress Management Levels Among Participants)

Stress Level	Frequency (n)	Percentage (%)
Low (1)	114	22.10%
Moderate (2)	269	52.00%
High (3)	134	25.90%
Total	517	100.00%

The distribution of stress management levels among college-going women in Kashmir is presented in Table 1. The majority of participants (52.00%, $n = 269$) exhibited moderate stress management, followed by 25.90% ($n = 134$) who demonstrated high stress management. A notable 22.10% ($n = 114$) of participants had low-stress management, indicating a significant proportion struggling with effective coping strategies.

The mean stress management score was 2.04 (SD = 0.69), suggesting that, on average, the participants exhibited moderate stress management abilities. The findings highlight the variability in stress-coping strategies among college-going women, emphasizing the need for targeted interventions to enhance stress management skills, particularly those in the low category.

Figure 1. Distribution of Stress Management Levels Among Participants. The chart illustrates the percentage of

participants falling under low (1), moderate (2), and high (3) stress management categories.

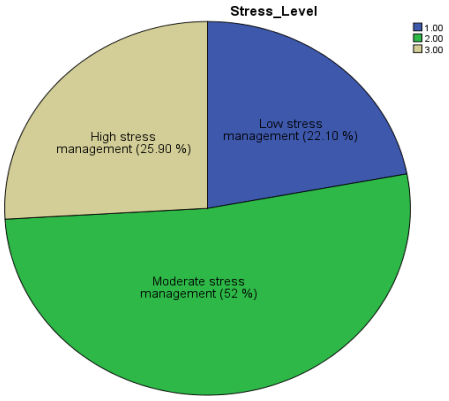

Figure 1

Figure 1 visually represents the distribution of stress management levels among the participants. The green section (52%) corresponds to individuals with moderate stress management, which constitutes the majority. The beige section (25.9%) represents participants with high-stress management, while the blue section (22.1%) represents those with low-stress management. The chart effectively illustrates that more than half of the participants exhibit moderate stress management abilities. At the same time, a significant portion still falls into the low category, suggesting a need for targeted stress management interventions.

Table 2: Descriptive Statistics for Stress Management Score

Statistic	Value
N (Valid Cases)	517
Mean	3.5358
95% CI for Mean (Lower Bound)	3.4205
95% CI for Mean (Upper Bound)	3.6511
5% Trimmed Mean	3.5609
Median	4.0000
Variance	1.780
Std. Deviation	1.33424
Minimum	0.00
Maximum	6.00
Range	6.00
Interquartile Range	2.00
Skewness	-.350
Std. Error of Skewness	.107
Kurtosis	-.391
Std. Error of Kurtosis	.214

The descriptive statistics indicate that the mean stress management score among the participants is 3.54 (SD = 1.33), suggesting an overall moderate level of stress management. The median score (4.00) is slightly higher than the mean, indicating a slight skew towards higher stress management ability. The minimum and maximum values (0 to 6) confirm the full range of responses on the scale.

The skewness value (-0.350) suggests a slight leftward skew, meaning that more participants tend to have higher stress management scores. The kurtosis value (-0.391) indicates a relatively normal distribution without extreme peaks or tails.

Table 3: Tests of Normality for Stress Management Score

Kolmogorov-Smirnov[a]			Shapiro-Wilk		
Statistic	df	Sig.	Statistic	df	Sig.
.180	517	.000	.937	517	.000

The Kolmogorov-Smirnov ($D = 0.180$, $p < 0.001$) and Shapiro-Wilk ($W = 0.937$, $p < 0.001$) tests indicate that the stress management score significantly deviates from a perfectly normal distribution. However, given the large sample size ($N = 517$), slight deviations from normality do not significantly impact the interpretation of Pearson's correlation results. The box and Q-Q plots confirm the distribution is approximately normal, allowing further parametric statistical procedures.

Table 4: Pearson's Correlation Between Stress Management Score and coping strategies

Variables	Stress Management Score	Recognize Stressors	Stress-Relief Techniques	Seek Support	Adjust Lifestyle	Writing & Deep Breathing	Seek Professional Help
Stress Management Score	1	.177**	.549**	.228**	.407**	.515**	.573**
Recognize Stressors	.177**	1	.165**	.045	.105*	.102*	.140**
Stress-Relief Techniques	.549**	.165**	1	.100*	.313**	.195**	.178**
Seek Support	.228**	.045	.100*	1	.249**	.147**	.112*
Adjust Lifestyle	.407**	.105*	.313**	.249**	1	.341**	.264**
Writing & Deep Breathing	.515**	.102*	.195**	.147**	.341**	1	.243**
Seek Professional Help	.573**	.140**	.178**	.112*	.264**	.243**	1
**. Correlation is significant at the 0.01 level (2-tailed).							
*. Correlation is significant at the 0.05 level (2-tailed).							

Table 4 presents the Pearson correlation coefficients between the Stress Management Score and its six coping strategies. The results indicate that all coping strategies exhibit a significant positive correlation with the Stress Management Score ($p < .01$). The strongest correlations were observed between seeking professional help when overwhelmed ($r = .573$, $p < .01$) and using stress-relief techniques such as deep breathing, yoga, or mindfulness ($r = .549$, $p < .01$). Additionally, practicing writing or deep breathing when feeling upset, angry, or stressed ($r = .515$, $p < .01$) and adjusting one's lifestyle to cope with environmental factors like limited sunlight or isolation ($r = .407$, $p < .01$) also showed moderate positive associations with the overall stress management score.

A weaker but still significant correlation was found for seeking support from friends, family, or mental health professionals ($r = .228$, $p < .01$) and recognizing stressors in daily life ($r = .177$, $p < .01$). These findings suggest that while all six behaviors contribute to stress management, some strategies (such as professional help-seeking and relaxation techniques) have a more substantial impact than others.

Furthermore, intercorrelations between coping strategies indicate that individuals who practice one stress management strategy are likely to engage in others. For instance, adjusting one's lifestyle to cope with limited sunlight or isolation was positively correlated with both using stress-relief techniques ($r = .313$, $p < .01$) and writing or deep breathing when upset ($r = .341$, $p < .01$). Similarly, those who seek professional help also tend to recognize their stressors ($r = .140$, $p < .01$) and use deep breathing techniques ($r = .243$, $p < .01$).

These results provide empirical support for integrating multiple coping strategies in stress management programs, emphasizing the need for a holistic approach that includes

both self-regulation techniques and external support systems.

Discussion

The findings of this study provide critical insights into stress management strategies among college-going women in Kashmir. The results indicate that while the majority of participants (52%) demonstrated moderate stress management abilities, a considerable proportion (22.1%) exhibited low-stress management, suggesting that many students struggle with effective coping strategies. This aligns with previous research highlighting that young adults, particularly female students, face high levels of academic and psychosocial stress, which may impact their coping efficacy (Beiter et al., 2015).

Stress Management Levels and Coping Strategies

The categorization of stress management levels suggests that only 25.9% of participants consistently engage in effective stress-coping mechanisms. The mean stress management score ($M = 3.54$, $SD = 1.33$) further supports the notion that stress coping is moderate on average but varies significantly among individuals. Studies have shown that young adults often rely on maladaptive coping strategies, such as avoidance or emotional suppression, which can contribute to chronic stress and anxiety (Kadhiravan & Kumar, 2012). This highlights the necessity for structured stress management interventions to improve coping skills among students, particularly those in the low-stress management category.

Correlational Findings and Key Coping Strategies

The correlation analysis underscores the varying effectiveness of different stress-coping strategies. The strongest predictor of overall stress management was seeking professional help ($r = .573$, $p < .01$), followed closely by using stress-relief techniques such as deep breathing, yoga, or mindfulness ($r = .549$, $p < .01$). These findings are consistent with previous studies suggesting that structured interventions, such as mindfulness-based stress reduction (MBSR), significantly improve stress resilience and emotional regulation (Sharma & Rush, 2014). Additionally, writing and deep breathing techniques also exhibited a strong correlation with stress management ($r = .515$, $p < .01$), supporting existing literature that emphasizes expressive writing as a valuable tool for emotional regulation and stress relief (Pennebaker, 1997).

Other significant coping strategies included adjusting one's lifestyle to cope with environmental stressors such as limited sunlight or isolation ($r = .407$, $p < .01$). This result aligns with research on seasonal affective disorder (SAD) and the importance of lifestyle modifications, such as increased exposure to natural light and physical activity, in managing mood disturbances (Rosenthal et al., 1984). Moreover, while seeking social support from friends, family, or mental health professionals was significantly correlated with stress management ($r = .228$, $p < .01$), it was a weaker predictor than individual self-regulation strategies. This aligns with studies indicating that while social support can act as a buffer against stress, its effectiveness varies based on the quality of relationships and an individual's ability to utilize external resources effectively (Taylor, 2011).

Implications for Stress Management Interventions

The results emphasize the need for holistic stress management programs that integrate both self-regulation strategies (e.g., mindfulness, expressive writing, deep breathing) and external support systems (e.g., professional counseling, peer support groups). Given that participants who practiced one coping strategy were likely to engage in others (e.g., those who sought professional help also recognized their stressors and used relaxation techniques), intervention programs should encourage the adoption of multiple coping mechanisms rather than relying on a singular approach.

Additionally, the moderate yet significant correlation between recognizing stressors and overall stress management ($r = .177$, $p < .01$) suggests that self-awareness training should be incorporated into mental health education. Teaching students how to identify stress triggers and proactively implement coping mechanisms could enhance their overall resilience to stress (Gross, 2015).

Limitations and Future Directions

While this study provides valuable insights into stress-coping strategies among college-going women in Kashmir, several limitations must be acknowledged. First, the study's cross-sectional nature prevents causal inferences between stress management strategies and outcomes. Longitudinal studies are needed to examine how coping strategies evolve over time and their long-term effectiveness. Second, the reliance on self-reported measures may introduce response bias, as participants might have overestimated or underestimated their coping abilities. Future research should incorporate objective physiological measures (e.g., cortisol levels, heart rate variability) to complement self-reported data.

Moreover, given that cultural and environmental factors influence stress perception and coping mechanisms, future studies should explore context-specific interventions tailored to the unique challenges faced by women in Kashmir. For instance, interventions addressing seasonal stressors such as limited sunlight exposure and sociocultural expectations around gender roles may enhance the effectiveness of stress management programs in this population.

Finally, the findings of this study highlight the importance of integrating self-regulation strategies with external support mechanisms to enhance stress management among college-going women. Seeking professional help and engaging in structured stress-relief techniques were the most effective coping strategies while recognizing stressors and seeking social support played a moderate role. These insights emphasize the need for evidence-based mental health interventions tailored to the specific needs of young women in Kashmir. Future research should focus on longitudinal assessments and intervention-based studies to develop sustainable and culturally relevant mental health programs.

Conclusion

The findings of this study highlight the variability in stress-coping strategies among college-going women in Kashmir, with the majority demonstrating moderate stress management abilities. However, a significant proportion (22.1%) exhibited low-stress management, emphasizing the need for targeted interventions to improve coping skills. Among the various strategies,

seeking professional help and using stress-relief techniques such as deep breathing, yoga, or mindfulness were the most strongly associated with effective stress management. Lifestyle adjustments and self-regulation techniques like writing or deep breathing contributed significantly to stress-coping abilities.

These results underscore the importance of promoting a multifaceted approach to stress management, integrating both self-help techniques and external support systems. Colleges and universities should consider implementing structured programs encouraging students to seek professional guidance, practice mindfulness techniques, and develop resilience through social and environmental adaptations. Future research should explore the long-term impact of these coping strategies and assess their effectiveness in reducing stress-related health risks.

By addressing stress management in a structured and evidence-based manner, educational institutions can empower young women to develop healthier coping mechanisms, ultimately enhancing their well-being and academic performance.

References

1. Anbumalar, C., Dorathy Agines, P., Jaswanti, V. P., Priya, D., & Reniangelin, D. (2017). Gender differences in perceived stress levels and coping strategies among college students. *International Journal of Indian Psychology, 4*(4), 46–55. https://ijip.in/articles/gender-differences-in-perceived-stress-levels-and-coping-strategies-among-college-students/
2. Beiter, R., Nash, R., McCrady, M., Rhoades, D., Linscomb, M., Clarahan, M., & Sammut, S. (2015). The prevalence and correlates of depression, anxiety, and stress in a sample of college students. *Journal of Affective Disorders, 173*, 90-96. https://doi.org/10.1016/j.jad.2014.10.054
3. Dar, I. A., & Iqbal, N. (2019). Stress and coping in relation to gender and domicile among college students in Kashmir. *Sri Lanka Journal of Social Sciences, 42*(2), 127–136. https://sljss.sljol.info/articles/10.4038/sljss.v42i2.7796
4. Greater Kashmir. (2022, November 27). 60–65% of school-going adolescents suffering from academic-related stress in Kashmir. *Greater Kashmir*. https://www.greaterkashmir.com/gk-top-news/60-65-of-school-going-adolescents-suffering-from-academic-related-stress-in-kashmir/
5. Gross, J. J. (2015). Emotion regulation: Current status and future prospects. *Psychological Inquiry, 26*(1), 1-26. https://doi.org/10.1080/1047840X.2014.940781
6. Jan, Q., & Mattoo, M. I. (2022). Academic stress and stress management among senior secondary school girls of Kashmir. *International Journal of Indian Psychology, 10*(3), 937–943. https://ijip.in/articles/academic-stress-and-stress-management-among-senior-secondary-school-girls-of-kashmir/
7. Kadhiravan, S., & Kumar, K. (2012). Enhancing stress coping skills among college students. *Journal of Psychological Research, 56*(3), 173-182.

8. Bashir A, Batool E, Bhatia T, Shoib S, Mir NA, Bashir U, Singh R, McDonald M, Hawk ME, Deshpande S. Community practices as coping mechanisms for mental health in Kashmir. Soc Work Ment Health. 2023;21(4):406-421. doi: 10.1080/15332985.2022.2159779. Epub 2022 Dec 28. PMID: 37551352; PMCID: PMC10406466.
9. Pennebaker, J. W. (1997). Writing about emotional experiences as a therapeutic process. *Psychological Science, 8*(3), 162-166. https://doi.org/10.1111/j.1467-9280.1997.tb00403.x
10. Rosenthal, N. E., Sack, D. A., Gillin, J. C., Lewy, A. J., Goodwin, F. K., Davenport, Y., Mueller, P. S., Newsome, D. A., & Wehr, T. A. (1984). Seasonal affective disorder: A description of the syndrome and preliminary findings with light therapy. *Archives of General Psychiatry, 41*(1), 72-80. https://doi.org/10.1001/archpsyc.1984.01790120076010
11. Sharma, M., & Rush, S. E. (2014). Mindfulness-based stress reduction as a stress management intervention for healthy individuals: A systematic review. *Journal of Evidence-Based Complementary & Alternative Medicine, 19*(4), 271-286. https://doi.org/10.1177/2156587214543143
12. Rentala S, Thimmajja SG, Tilekar SD, Nayak RB, Aladakatti R. Impact of holistic stress management program on academic stress and well-being of Indian adolescent girls: A randomized controlled trial. J Educ Health Promot. 2019 Dec 31;8:253. doi: 10.4103/jehp.jehp_233_19. PMID: 32002425; PMCID: PMC6967204.
13. Sofal, F. A., & Jan, S. (2022). An empirical investigation of occupational stress and stress management of working and non-working women in central Kashmir. *Journal of Research & Innovations in Education, 8*(1), 53–74. https://publications.cukashmir.ac.in/index.php/jrie/article/view/47
14. Taylor, S. E. (2011). Social support: A review. In M. S. Friedman (Ed.), *The Oxford Handbook of Health Psychology* (pp. 189-214). Oxford University Press.
15. The Guardian. (2024, November 24). 'Resilience interventions do work'—Why coping strategies should be a staple of education. *The Guardian*. https://www.theguardian.com/society/2024/nov/24/resilience-interventions-do-work-why-coping-strategies-should-be-a-staple-of-education