Exploring Common Coping Mechanisms and Mindset for The Mental-Emotional Well-Being of Young People

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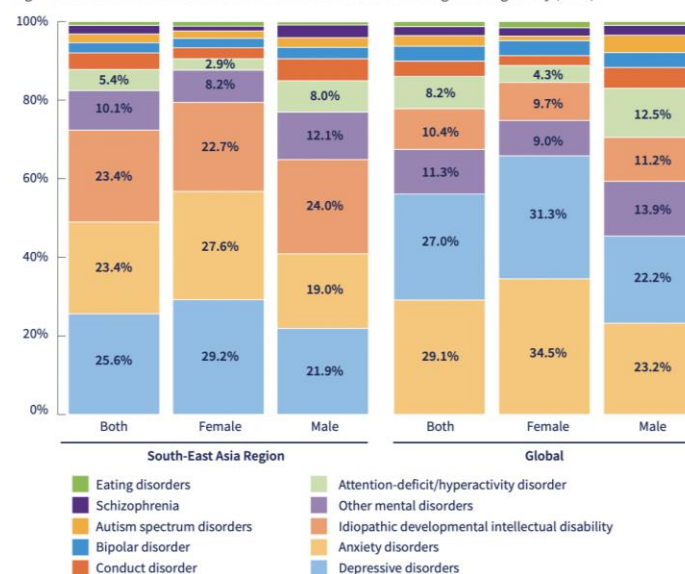[1]Politeknik Bentara Citra Bangsa; [2]University of Melbourne

Abstract

This paper explores the conflict surrounding common coping mechanisms, mindsets and the mental-emotional state of young people whilst discovering strategies for managing mental-emotional experiences and their implications for young people's growing needs and well-being. Theoretical models highlight the positive relationship between effective emotional regulation, mainly through reappraisal and problem-solving skills, resilience, growth mindset, and various coping strategies. Young people are struggling to cope with their mental-emotional well-being and often face struggles to seek help. Challenges in these areas have resulted in health complications and numerous mental difficulties and disorders. The growing interest in mindfulness as a tool to enhance adaptive emotional regulation provides further importance in developing such skills in therapeutic contexts to improve overall well-being.

Keywords: Mindset;Mental-Emotional; Coping Mechanism; Mindfulness; Regulation

Introduction

The World Health Organization (WHO) examined that the common causes of healthy life lost to disability (YLDs) include depressive disorders (5.3%), migraine (3.3%), anxiety disorders (2.7%). Depressive disorders rank as the second most common cause. In WHO Global Health Estimates (GHE) in 2019, depressive disorders and self-harm are among top 20 causes of disability-adjusted life of years (DALYs). WHO (2023) stated its estimation globally of 970 million people experiencing mental disorders with a prevalence of 13.2% for WHO South-East Asia Region.


Figure 1. High percentage in Anxiety Disorders and Depressive Disorders in South-East Asia Region and globally

The South-East Asia Region has over a quarter billion people. It has been estimated that one in every four people living with mental disorders is within the Region (260 million out of 970 million). In 2019, alcohol and substance use impacted 161 million people globally. It was further explained that alcohol use disorder was responsible for 60% of the YLDs and DALYs. The drug use showed a higher prevalence in females in the drug use within the South-East Asia Region (59.7%) of which the highest percentage of drugs stated is Opioid. This might suggest that the drug Opioid (74.4%) was used to release severe pain, illness and other conditions.

Fig. 18. Distribution of substance use disorder (2019)

Source: Global Burden of Disease (GBD), 2019
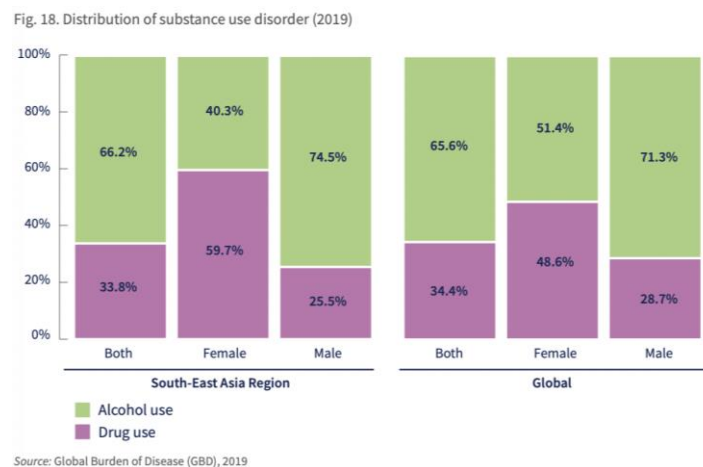
Figure 2. Alcohol and Drug Use in South East Asia Region and globally

Chen, Q., et al. (2024) assess trends in mental health disorders and issues analysed through the prevalence and disability-adjusted life of years (DALYs) rates in Asian countries. The results were Depressive disorders (37.1%), followed by anxiety disorders (21.5%) and schizophrenia (13.8%), as the top three major components to mental disorder DALYs. Depressive disorders remained within the top 25. In the year 1990, depressive disorders ranked 22nd. However, in 2019 it was ranked 15th according to the global burden of disease (GBD). This trend shows the rising number of depression and disorders within nearly three decades. There is a significant rise in the burden of mental disorders. The study discovered an increase of prevalence of mental disorders in young people and the burden of mental disorders was greater in females compared to male population. Symptoms frequently appear at a young age, which links to other factors such as limited resources, low support from family, lack of access, lack of services, stigma, cultural factors, socio-economic factors and the pandemic.
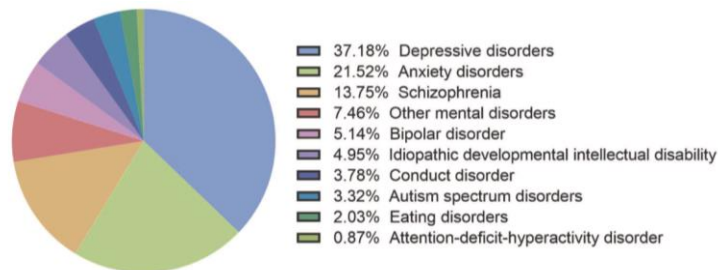
Fig. 1 **Distribution of DALYs due to mental disorders in Asia in 2019.** DALYs, disability-adjusted life years.

Figure 3. Pie chart showing percentage of Depressive disorders (37.18%) among other mental disorders in Asia

When the rise in needs of treatment, interventions and services arise significantly, it becomes a global priority to provide help, to cater to many individuals. Chen, Q., et al. (2024) described that lack of treatment may result in suicide, self-harm and risk of death.

Key Substance Use and Mental Health Indicators in the United States: Results from the 2021 National Survey on Drug Use and Health (SAMHSA, 2022) stated among adolescents aged 12 to 17 in 2021, 20.1 percent (or 5.0 million people) had a past year major depressive episode (MDE), and 14.7 percent (or 3.7 million people) had a past year MDE with severe impairment. It was concluded that among adults aged 18 or older in 2021 who perceived that they ever experienced problems with their mental health. Additionally, percentages of those who considered themselves to be in recovery or to have recovered from their mental health issues did not differ among racial or ethnic groups. This implies that globally, young adults struggle with mental health issues despite cultural backgrounds.

Common Coping Mechanisms of Young People

Clemens, et al. (2020) explained COVID-19 pandemic was a period of isolation. It led many people to frustration, boredom, uncertainty about the future, and profound loss of interpersonal connection. Kerekes, et al. (2021) also described how many young people reported increased screen time and social media use. As interactions shifted to online, more young people had to adapt and cope. Among other coping mechanisms, those who traditionally sought comfort from friends or family had to turn to video calls on Zoom, reshaping their support networks during difficult times.

Some challenges which may occur include cultural differences and finding the self-concept. Papalia & Martorell (2023) explained in highly individualistic cultures they are seen as separate from one another, meaning independence and self-reliance are highly valued. Individuals in

cultures such as the United States or Europe may tend to encourage individuality, self-expression, whereas in collectivistic cultures such as India, China, or countries of Southeast Asia, individuals are described as fundamentally interrelated. This suggests that group harmony and cohesiveness take precedence over individual concerns. Thus, parents tend to encourage compliance with authority, appropriate conduct, humility, and a sense of belonging to the community (Oyserman et al., 2002). The implication describes children of differing cultural styles and backgrounds directly affecting their sense of identity and self-definition starting from early ages of 3 years old.

Coping mechanisms have increasingly become an important factor due to recent pandemic events. Traditional coping mechanisms such as physical activity and social support continue to play a vital role in managing mental health in today's world, and were evidently helpful to individuals during the pandemic, especially those in their adolescence. Due to social distancing restrictions and the inability to leave the house, research has shown a decrease in engaging with physical activities (Meyer et al., 2020; Tison et al., 2020; Bu et al., 2021; Meiring et al., 2021). Doing regular exercises can help individuals alleviate symptoms of stress, anxiety and depression, boost mood, and enhance overall well-being (Firth et al., 2020). Engaging in physical activity can also provide opportunities for social interaction and support through clubs (community), and allows individuals to develop skills in communication, leadership, collaboration and a sense of belonging (Walseth, 2006). Furthermore, social support in the forms of emotional, informational and practical assistance from friends or family can provide comfort, validation and resources during difficult times. When individuals have strong social networks, it can help reduce feelings of isolation and stress (Dong & Zhang, 2022), which can also encourage positive coping strategies (Yasin & Dzulkifli, 2010).

However, in this digital era, technology is capable of increasingly meeting personal needs and provide faster and more personalised tools through apps that can help improve mental well-being (Aboujaoude et al., 2015), including reductions in stress, anxiety, and depressive symptoms (Firth et al., 2017). These apps also support mood management and attention control, promoting healthier behaviours like physical activity (Yang & Koenigstorfer, 2020). and sleep hygiene (Arroyo & Zawadzki, 2022; Linardon et al. 2024). Additionally, social media has also been an influential platform for mental health support, especially among the younger generations. Various platforms allow individuals to share their experiences, seek advice, and offer encouragement to others whenever and wherever they want without having to disclose one's personal identity (Berger et

al., 2005). It can also serve as a valuable resource tool to access mental health information. It can also foster a supportive online space, where individuals can find comfort in other people's personal stories about their challenges, to make individuals feel less alone (Highton-Williamson et al., 2015).

While social media can be a valuable coping mechanism tool, it also has its negative aspects that could have detrimental effects to individual mental health. Excessive social media use could lead to comparison with others (Qiu, 2024), as individuals tend to show the idealised versions of themselves and their lives online, which can result in lower levels of self-esteem (Vogel et al., 2014; Moningka, 2020). Research has shown a positive correlation between screen time and depression, anxiety, and other mood disorders (Twenge et al., 2018). Moreover, individuals can also struggle with differences in genuineness between in-person and face-to-face interactions versus online interaction, creating feelings of isolation (Nakshine et al., 2022). Because of all this, there is a growing interest in harnessing social media to offer support. Recent studies highlight the effectiveness of social media in delivering mental health interventions, particularly among young people aged 12 to 25. Online support groups provide emotional and informational assistance, fostering a sense of community through shared experiences. This exchange can enhance self-efficacy, promote positive coping strategies and reduce feelings of isolation (Pfeiffer et al., 2011). However, it is important to understand the thoughts and emotions behind our responses in the development of an individual. This is where mindsets, Cognitive Behavioural Theory (CBT) and Emotional Regulation (ER) emerge as important aspects of this paper.

Gross, J. (2006) summarised that theoretical evidence has mostly focused on the period of development of infancy through adolescence (Thompson, 1990, 1994) which is a crucial period in the development of frontal lobes, conceptual and social aspects. The influence of emotions, personal history, experiences, attitudes, expressions and values that coexist within a complex system of the development of a human being. He describes how individual differences in emotional regulatory capacities develop with personality over time and children learn to manage feelings consistently with the tolerances. The shifts in emotion regulation should be expected due to changes in contextual factors (suppression in early adulthood; adolescence stage). Gross, J. (2006) further explained how emotional dysregulation of children or adults can be viewed as the only adaptive response options in circumstances in which the individuals have a need to express emotions, such as within the context of an emotionally abusive family. This conflict surrounding

the risk of mental-emotional state of young people shows the complex experiences of human development.

Development Stages of Adolescents and Young Adulthood

Typical major developments in eight periods of human development of which two are elaborated and studied in this paper. In the period of adolescence (ages 11 to about 20) typically signs of physical growth and rapid, profound changes occur (Papalia & Martorell, 2023). It includes the reproductive maturity growth and risks such as eating disorders, drug abuse, and risks of behavioural issues. The cognitive development described within the adolescence period is the ability to think abstractly, use of scientific reasoning and focus for college, university and future career. Furthermore, the period of adolescence involves the risk of anxiety and depression which might occur in some individuals. Typically, the adolescence stage involves thinking that persists in attitudes, behaviours, slowly developing into maturity. The psychosocial aspect involves the search for identity, their understanding of themselves and where peers highly influence the adolescent. They may exert a positive or negative influence depending on the surrounding environment.

Secondly, the period of Emerging and Young Adulthood (ages 20 to 40) was described as the peak of physical condition, where it may decline slightly, depending on lifestyle choices and other influences of health. The cognitive factor of young adults may mature in moral judgments, evolving in more complex thoughts, ability to make choices, personal, educational and occupational choices after several periods of exploration. It is expected that personality traits become relatively stable, but changes in personality may be influenced by life stages, events and relationships with other people. Moreover, typically emerging young adults tend to be involved in intimate relationships, where most settle for marriage, become parents, or work towards personal lifestyles and goals within the psychosocial development (Papalia & Martorell, 2023).

The major developments table capture the significance of adolescence transition to the young adulthood period. To conclude, it suggests emerging young adults are expected to evolve into a healthy adult who is capable of adaptation, complex thinking, planning, regulation and maturity. They are expected within society to find direction as they enter adulthood. They are expected to complete daily tasks, responsibilities, build a family, and become independent individuals. The transition is crucial as most adolescents are finding the way of life, manoeuvring and eventually adapting as an adult. However, this may impact the individual's mental-emotional well-being and

complex experiences which result in complications, cope with stress, pressure and other challenges which may be described as experiencing a quarter life crisis.

Commonly in adolescence and young adult stages, they face a complex phase of finding their path, work on a number of goals such as career, social relationships, maintain mental, emotional, spiritual, physical activities and organise finances, schedule daily for study, work, and targets. These factors and areas depend on the individual's mindset, routine and beliefs. It may be equally exciting and impactful in their development as it is a constant challenge and struggle for young people.

Table 1. Key phases of development of Adolescence and Young Adulthood on Erikson Psychosocial Development Stages

Erikson Psychosocial Development	
Phase of Adolescence	Phase of Young Adulthood
Identity vs Confusion	Intimacy vs Isolation
Social relationships, experiment with and develop identity	Romantic, intimate relationships, stable sense of identity and role
Common thoughts in Adolescence	Common thoughts in Young Adulthood
Who am I?	Will I be loved, or alone?
What am I going to do?	How can I achieve, plan, build ….?
Am I ….. enough? (cool, smart, etc.)	What matters to me?

Emphasises on the importance of early relationships with primary caregivers play an important role in the emotional regulation and interpersonal dynamics throughout life stages. Short and long term memories are shaped through events as well as emotions of the individual in the human brain. More specifically, the brainstem plays a key role in the emotions of an individual.

Brainstem and Limbic System

The brainstem is responsible for every individual's emotional regulation through three major networks: Ascending, Descending and Modulatory. The Ascending network facilitates the transmission of sensory information to the higher brain regions, allowing individuals to develop

an awareness of their emotional and physiological states. The Descending network regulates physiological responses to emotional stimuli by sending signals from the brain to various bodily systems. Hence, it plays a crucial role in modulating responses to stressors and anxiety. When individuals are capable of responding appropriately to their environmental demands, they are able to maintain emotional homeostasis. Arciniegas et al. (2013) explained the limbic system was described in 1878 as a collection of structures at the junction of the cerebral hemispheres and diencephalon. It describes limbus in Latin which holds the meaning of edge or border, reflecting the location of the structure and its connections to the thalamus, hypothalamus, and cortex. The limbic system is involved in processing of episodic memories (spatial and temporal context), survival functions, and complex interactions between cerebral functions. The connection with frontotemporal areas (cingulate gyrus, septal nuclei, etc.) plays a prominent role in the experience of negative emotions.

The role of the amygdala in emotion and its connection to the hippocampus of memory actively plays an important key role in survival. Every human being learns from events, holds memories from experiences, and perceives events within the functioning of our brainstem. The amygdala as a collection of nuclei located in the anterior temporal lobe, adjacent to the hippocampus, processes the emotional learning, sensory input, and evokes memories in response to the sensory input (Arciniegas et al., 2013)

Mindset and Well-being

In recent years, there has been a growing interest in the role of mindfulness in adaptive emotion regulation (Gratz & Roemer, 2004). It involves awareness and acceptance of one's thoughts, feelings, and sensations (Shapiro & Schwartz, 1999). Furthermore, mindfulness-based therapies that focus on taking a non-judgemental stance have been developed to treat various disorders, such as depression, anxiety, eating disorders, substance use, and borderline personality disorders (Segal et al., 2002; Roemer et al., 2008; Quillian-Wolever, 2006; Breslin et al., 2002; Lynch et al., 2007).

Dweck (2006) describes how one tries to prove themselves whether in the classroom, in their careers, their relationships and that every situation calls for a confirmation of their intelligence, personality or character. The evaluation lies in questions such as, *Will I succeed or fail? Will I look smart or dumb? Will I be accepted or rejected?* This concludes how the view of self profoundly affects the way they live their life as explained in the book. It describes how people with a fixed mindset believe their qualities are carved in stone and therefore it creates the urgency to prove

themselves over and over. Pimenta, Hunter, Rasmussen, Cogan & Martin (2024) published a study entitled, 'Young people's coping strategies when dealing with their own and a friend's symptoms of poor mental health: a qualitative study' for the Journal of Adolescent Research, Glasgow Caledonian University. It describes the concern and symptoms of young people in relation to being judged, disclosures to whom they trust, and the study contributes to better understanding of the different ways in which young people cope with their own symptoms and symptoms experienced by a friend.

The rising concern of young people in relation to academic culture and expectations in Asia can be further studied to understand the thought patterns shaped from their environment. Yang, R. (2016) described East Asia's corrupt academic culture which affected or hurt the region's higher education directly, with profound impact on everyday operations. Among countries in Asia, Japan had the least corruption in the academic culture. However, it is a widespread, deep-rooted social problem for many countries in East Asia.

The Cognitive Behavioural Theory (CBT), developed a powerful psychological framework that highlights the connection between our thoughts, feelings, and behaviours. The theory suggests that our thoughts significantly influence our emotional responses and actions, often leading to emotional distress, anxiety, and unhelpful behaviours. This understanding has made CBT integral to various mental health treatments for all ages, addressing issues such as anxiety, depression, and substance abuse. Through techniques like exposure therapy and behavioural activation, CBT encourages individuals to confront negative emotions and engage in positive activities, reshaping thought patterns and fostering emotional resilience.

Ledley et al. (2010) describes in traditional CBT, troublesome thoughts are categorised into sensible or illogical thoughts. Illogical thoughts may often lead to negative effects and reframed with the help of the therapist to become more rational. Clients are expected to experience a new way of thinking within their given situation. Ledley et al. (2010, p. 200) added, various roadblocks may occur, when focused on a single problem, which may result in unproductive or counterproductive treatment. Furthermore, it is appropriate to pause, refocus and return, and adapt to another treatment to resolve significant roadblock before returning to the initial treatment. Ledley et al., (2018) explained the CBT approach is an integration of two originally separate theoretical approaches: the behavioral and the cognitive approach. Beck developed the cognitive model in the 1960s as a treatment for depression to understand dysfunctional thoughts that affect

emotions and behavior. Beck adapted the cognitive model in 2011. The cognitive model stems from 1) core beliefs, 2) intermediate beliefs, 3) situation/event, 4) automatic thoughts, and lastly, 5) reactions (emotional, behavioral, physiological). Changing negative thought patterns have shown improvement for mental-emotional responses and coping strategies. Through cognitive behavior therapy (CBT), individuals learn effective problem-solving skills and mindfulness. CBT helps young people recognise and modify maladaptive thoughts which often contribute to feelings of anxiety and depression.

Emotional Regulation of Young People

Emotional regulation refers to an individual's ability to effectively manage and respond to life's experiences. The strategies humans use to regulate our emotions impact the well-being, overall life satisfaction, and relationships in the social context (family, peers, community). Emotional regulation is particularly crucial for young people navigating life's challenges, as it helps maintain focus on personal goals even amidst stress. Those who are capable of regulating their negative emotions, such as anger, frustration, or anxiety, are more likely to stay motivated and view challenges as opportunities for growth. By enhancing emotional regulation, individuals can also improve their problem-solving skills and develop positive coping mechanisms. Difficulties with emotional regulation are associated with mental disorders (Berenbaum et al., 2003; Greenberg, 2002) such as borderline personality disorder (BPD; Lynch et al., 2007), major depressive disorder (Johnson, 2005), generalised anxiety disorder (GAD; Mennin et al., 2007), social anxiety disorder (SAD; Kashdan & Breen, 2008), eating disorders (Polivy & Herman, 2002), alcohol-related disorders (Sher & Grekin, 2007), and substance-related disorders (Sher & Grekin, 2007). However, not all mental disorders result from emotional regulation, literature evidence has shown correlation between people who have difficulties with emotional regulation and disorders.

Brackett, M. & Salovey, P. (2004) found emotionally intelligent people can manage their emotions more effectively and are able to better cope with life's challenges. It is believed that emotional intelligence can be measured. Theoretical models associated successful emotion regulation with good health outcomes, improved relationships, academic work, and performance (Brackett & Salovey, 2004; John & Gross, 2004).

Conclusions

Further research and studies may be developed to find data of mental-emotional well-being in the Southeast Asian population and its correlation between common coping mechanisms, emotional regulation and growth mindset in young people. Rising concerns for young people has shown most results for anxiety and depression. The ability to develop emotional regulation and growth mindset in the early phase of adolescence can be implemented within school programs, psychoeducation, psychotherapy, and various collaborations to equip young people and their development. Healthy ways of coping and support may be introduced through educating young people on common coping mechanisms that occur within several countries in Southeast Asia.

In light of the above, this field of study is important as cases of suicide, self-harm and risks has shown a lack of mental-emotional well-being and lack of knowledge as well as treatment for young people. As this paper has presented, the knowledge of the human brain with specific focus on the brain stem, processes of memories and experiences need to be further explored. We hope this paper can lead to many studies. Firstly, the current data of mental-emotional well-being of young people in Indonesia and Southeast Asia should be collected and the approach of applied research within a specific group of young people may be an interesting idea. It is advised that one group of study will receive treatment and education regarding the topic of study.

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