


**Research Article**

# Post-Pandemic Depression, Coping Strategies, And Social Adjustment Among Males and Females

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**Abstract**

This study aimed to evaluate post-pandemic depression, coping, and social adjustment between men and women, and to add another objective of developing a valid scale for evaluating post-pandemic depression. Depression is referred to here as the persistent experience of sadness and loss of interest, while coping mechanisms are the mechanisms used by individuals to confront stress and emotions. Social adjustment is defined as a person's capacity to accommodate society's changes and adversity. A comparison design directed the research, investigating gender differences in a sample of 80 people (40 men and 40 women), between the ages of 20 and 45, recruited via a snowball sampling strategy over nine weeks. Data were gathered through an online questionnaire and analysed with SPSS. The first hypothesis, expecting higher depression in men, was falsified ( $t = 0.592, p > 0.05$ ), as was the second hypothesis that men would rate higher in post-pandemic depression compared to women ( $t = 1.805, p > 0.05$ ). The third hypothesis proposing that more coping strategies would be employed by men was also not verified ( $t = -0.499, p > 0.05$ ). But the fourth hypothesis, which predicted higher social adjustment in males, was confirmed by the findings ( $t = -2.126, p < 0.05$ ). The findings suggest that males and females suffer equally from post-pandemic depression and employ similar coping mechanisms, although males seem to show higher social adjustment in coping with post-pandemic situations. In total, the research emphasizes the need to create gender-sensitive mental health policies that reflect certain social and emotional needs during periods of recovery.

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**KEYWORDS:** Post-Pandemic Depression, Coping Strategies, Social Adjustment, Gender Differences, Mental Health

**INTRODUCTION**

The COVID-19 pandemic brought extensive disruption to world health systems, economies, and everyday life. As recovering societies go forward, the psychological impact of the pandemic is still firmly entrenched, especially in the context of higher levels of depression, altered coping mechanisms, and

Social adjustment difficulties. These variables—post-pandemic depression, coping mechanisms, and social adjustment—are important to comprehend to respond to mental health in the wake of such a worldwide crisis. In addition, an understanding of how these experiences vary by gender provides critical information for the creation of effective and inclusive psychological interventions. Post-pandemic depression

describes the ongoing emotional discomfort that arises or persists after the acute period of a pandemic. The symptoms involve low mood, tiredness, hopelessness, and decreased interest in daily activities (American Psychiatric Association, 2013). Studies show that symptoms of depression grew dramatically with the COVID-19 pandemic and persisted to impact numerous people even after the lifting of lockdowns (Ettman et al., 2020). Symptoms have been attributed to loneliness, sickness concern, economic distress, and the loss of relatives (Xiong et al., 2020). In reaction to such psychological stressors, people resort to coping strategies, which refer to cognitive and behavioral attempts to deal with emotional distress and external demands (Lazarus & Folkman, 1984). Coping strategies are adaptive (e.g., problem-solving, seeking support) or maladaptive (e.g., avoidance, denial), and their effectiveness is a determining factor in emotional resilience. Notably, gender differences in coping have been found: men tend to use problem-focused strategies, whereas women tend to use emotion-focused or ruminative strategies (Tamres et al., 2002). Such differences may determine not just the severity of mental health symptoms but also recovery trajectories. Social readjustment, on the other hand, refers to one's capacity to readopt societal functions and social relationships despite evolving situations (Weissman & Bothwell, 1976). In the post-pandemic scenario, this involves coming back to the workplace, resuming habits, and recreating social relationships. Failure to adapt can contribute to recurrent distress and withdrawal from society, which are usually linked to depressive symptoms. Gendered roles and responsibilities—e.g., caregiving positions or work demands—can also influence the way males and females adapt to post-pandemic life (Alsubaie et al., 2019). With these dynamics in mind, this research aims to investigate and compare post-pandemic depression, coping mechanisms, and social adjustment between males and females. In the process, it also aspires to develop a valid post-pandemic depression measurement instrument. By examining the interactions of these variables through a gendered perspective, the research hopes to contribute to the developing body of literature required to inform targeted mental health interventions and policy design in post-pandemic recovery.

## LITERATURE REVIEW

Depression is still a major mental health issue in the world, especially among students, who undergo increased psychological vulnerability in times of crisis like the COVID-19 pandemic. The disruption brought by the pandemic has redefined social systems and placed restrictions that influence psychological welfare. The *International Journal of Educational Psychology* published a study on the correlation between depression and meaning in life among Peruvian and Venezuelan university students during the pandemic. The authors used a descriptive-correlational and cross-sectional design to evaluate 600 students (300 in each country) with the Beck Depression Inventory (BDI) and the Dimensional Sense of Life Scale (Latin American version). The findings indicated a moderate, negative correlation (Spearman's  $\rho = -0.610$ )

between depression scores and perceived meaning in life, which implies that a higher purpose of life is linked with smaller levels of depressive symptoms at times of crisis (Cruz & Zambrano, 2021). The other study, published in *SAGE Open*, examined the psychometric characteristics of the BDI-II within a longitudinal design with early adolescents. This study sought to confirm whether the BDI-II was measurement-consistent over time. Measurements were taken from 730 junior high school students (330 boys, 400 girls) over three years in six waves, and the results justified the longitudinal measurement invariance of the three-factor model: Negative Attitude, Performance Difficulty, and Somatic Elements. These results emphasize the fact that BDI-II can be used to measure depressive symptoms longitudinally, maintaining consistency in the assessment of adolescent mental health (Yin et al., 2022). Social adjustment has also been found to be a major area of focus when studying depression. A longitudinal study published in *JAMA Psychiatry* by Paykel and Weissman (1973) investigated social functioning in depressed women for eight months of follow-up. Although symptoms were improving, social maladjustment took longer to improve and was at risk of relapse. Six domains of primary adjustment were found in the study, where work performance and anxious rumination were particularly compromised. These results emphasize the long-standing and multidimensional nature of depression's effect on functional domains over symptomatology. Luty et al. (2003), publishing in the *Journal of Affective Disorders*, investigated factors affecting social adjustment in depressed patients as well. With the Social Adjustment Scale, they discovered that total social adjustment did not differ significantly between countries but varied with sample source (clinic vs. community). Clinical factors like severity of depression, younger age, and personality factors predicted poor social adjustment. These factors, though, accounted for only a small percentage of the variance, suggesting the multifaceted nature of social functioning in depressive disorders. Gender differences are also of critical importance to the occurrence and treatment of depression. Nolen-Hoeksema (2001) reported that women are almost twice as likely as men to develop depressive symptoms and receive a unipolar depressive disorder diagnosis. Her work indicates that women are more susceptible to ruminative coping mechanisms, which exacerbate and extend the duration of depressive episodes. These tendencies tend to develop in adolescence and continue through adulthood, and thus contribute to the gender disparity in rates of depression. Together, these studies highlight the complex role of depression that is impacted by psychological, social, and demographic factors. The pandemic has further amplified these dynamics among student populations, making the importance of investigating protective factors such as meaning in life paramount and alleviating social functioning and gender-specific coping mechanisms.

## METHODOLOGY

The sample selected for the present study includes 80 participants, 40 males and 40 females, from all over India. The questionnaire was shared with the help of Google Forms. The age group of the sample was between 20 – 45 of age group. Many friends and family members posted the link to the Google form on their status and shared it with their contacts, and the study managed to get a sample size of 80 participants. The research Google Form was created and shared on all the social media platforms like WhatsApp and Instagram; the data collection began in the month of 1<sup>st</sup> December 2021. And concluded on the 1<sup>st</sup> of February 2022. With the advanced technology the research managed to get a sample of 40 males and 40 females from all over India. It was a snowball sampling technique, and a systematic sampling technique was used to complete the data collection. Due to the pandemic situation, the data collection was completed online with the help of Google Forms within 9 weeks. The link to the study was shared on social media platforms, and participants were asked to share it by

Friends and family members were asked to forward the links respectively the snowball sampling technique was used. As well as

Individuals were selected at regular intervals from the sampling frame. The intervals were chosen to ensure an adequate sample size; thus systematic sampling technique was also used. Informed consent of the participant was taken, including all the demographic details, and as this research was measuring post-pandemic depression, it had sensitive questions related to personal and social life. Also, the participants were asked if they were infected with COVID, and they were also asked about their illness. Anonymity of the participant was maintained, and Confidentiality was maintained. All participants were informed that the data collected would be used purely for academic and educational purposes only. The ethical practices used in this research were intended to protect the rights, dignity, and privacy of all participants, as per standard research ethics guidelines.

## DATA ANALYSIS AND RESULT

The preliminary analysis

**Table 1.1:** variables

Variables	gender	N	Mean	Std. Deviation	Std. Error mean
Depression	Female	40	17.80	6.770	.757
	Male	40			
Post-pandemic depression	Female	50	39.37	15.246	1.532
	Male	50			
Coping strategies	Female	40	57.11	16.279	1.820
	Male	40			
Social adjustment	Female	40	24.25	6.235	.697
	Male	40			

Table 1.1 showing variables of depression, post-pandemic depression, coping strategies, coping strategies and social

adjustment, genders – female and male, then n, mean, standard deviation, standard error mean values

**Table 1.2**

Variables	Gender	N	Mean	t scores	Sig
Depression	Female	40	18.25	.592	.556
	Male	40	17.35		
Post-pandemic depression	Female	50	42.08	1.805	.074
	Male	50	36.61		
Coping strategies	Female	40	56.20	-4.99	.619
	Male	40	58.03		
Social adjustment	Female	40	22.80	-2.126	.037
	Male	40	25.70		

Table 1.2 showing variables of depression, post-pandemic depression, coping strategies, coping strategies and social

Adjustment, gender – female and male, the n, mean, t score, and sig values.

**Table 1.3:** Reliability Statistics

Cronbach alpha	Cronbach's alpha based on standard items	N of Items
.956	.957	17

Table 1.3 shows the reliability statistics scores for the scale of post-pandemic depression, with which Cronbach's alpha of .956.

Cronbach's alpha based on the standard items of .957, and the number of items was 17.

**Secondary Analysis:** After the completion of the preliminary analysis, the secondary analysis was done.

**Table 1.4:** Reliability Statistics

Cronbach alpha	Cronbach's alpha based on standard items	N of Items
.907	.908	12

Table 1.4 shows the reliability statistics scores for the scale of post-pandemic depression, in which the Cronbach alpha score obtained is .907, the Cronbach alpha based on the standard items is .908, and the number of items was 12.

## DISCUSSION

The current research sought to investigate post-pandemic depression, coping mechanisms, and social adjustment in males and females and, as an added goal, to develop a scale for assessing post-pandemic depression. A comparative study was used to explore gender differences in the three psychological constructs. The sample was 80 participants divided evenly between males and females, aged 20 to 45 years. Data were gathered via a Google Forms survey applying a snowball sampling strategy spanning nine weeks. In contrast to the initial hypothesis, which stated that overall depression levels would be higher in males than females, results showed no significant difference ( $t = 0.592$ ,  $p = 0.556$ ). This led to the rejection of the hypothesis, indicating that both genders reported equivalent levels of depression post-pandemic. This finding aligns with recent literature, which emphasizes that both men and women were psychologically impacted by the pandemic, albeit through different types of stressors and coping strategies. The second hypothesis, which tested whether post-pandemic depression would be greater in men, also did not reach statistical significance ( $t = 1.805$ ,  $p = 0.074$ ). While the p-value was close to the commonly accepted threshold of significance ( $p < 0.05$ ), the hypothesis was ultimately rejected. However, the near-significant result may suggest a trend that warrants further investigation with a larger sample size. This is especially relevant in light of global research indicating gendered mental health trajectories, often shaped by differing social roles, expectations, and pandemic-related stressors such as job loss or caregiving responsibilities. Regarding coping strategies, the third hypothesis proposed that males would score higher than females in the use of coping mechanisms. This hypothesis was also rejected based on statistically insignificant results ( $t = -0.499$ ,  $p = 0.619$ ). This may reflect a narrowing gender gap in coping behaviors, as increasing evidence shows that women are engaging in more active and constructive coping methods, particularly during times of collective crisis like the COVID-19 pandemic. The fourth hypothesis, that males would exhibit greater social adjustment than females, was supported by the findings ( $t = -2.126$ ,  $p = 0.037$ ). This statistically significant result suggests that males in the sample demonstrated better post-pandemic social adjustment than females. Cultural or contextual factors could contribute to this difference. For example, traditional gender roles may influence how men and women reintegrate socially and manage responsibilities during recovery periods. It is also possible that women experienced

more intense or prolonged disruptions in both domestic and Professional domains affect their overall adjustment levels. In general, although most hypotheses were not statistically supported, the study offers meaningful insights into gender-specific psychological outcomes in the aftermath of the pandemic. The significant finding related to social adjustment, along with the borderline significance of post-pandemic depression, indicates potential gendered experiences that merit deeper exploration in future research. Additionally, the initiative to develop a scale specifically designed to assess post-pandemic depression lays the groundwork for more accurate assessments.

## Implications, Limitations, And Suggestions for Future Research

There were a number of limitations to this research. The sample was modest in size, with only 80 participants, and this might influence the external validity of the results. The participants' age range was not controlled, and this might lead to variation in psychological reaction. The socio-economic status was not taken into account, which might have impacted the findings, particularly in terms of coping and adjustment. The geographical representation was also limited, so the sample was not diverse. In addition, the COVID-19 pandemic meant that the researcher had less control over the data collection process. Non-binary and other genders were not included in the study, with the survey only involving male and female subjects. Finally, the survey was only made available in English, thus limiting its accessibility to those who do not speak English. Although in this study gender-based differences were explored in post-pandemic depression, coping styles, and social adjustment, it leaves a lot open for further research. More studies can be done in those individuals who screened positive for COVID-19 to understand certain psychological effects. It is also possible to research individuals who lost relatives or loved ones during the first and second waves of the pandemic, since they are expected to have more pronounced symptoms of post-pandemic depression. The newly established Post-Pandemic Depression Scale can be a useful instrument for future studies and may also be applied in hospitals, mental institutions, and rehabilitation facilities for screening and diagnostic purposes. In addition, future research might be enhanced by qualitative methodology and intervention-based measures to offer therapeutic value to participants. Subsequent research might incorporate participants who have tested positive for COVID-19 to gain a better insight into the direct psychological impact of the virus. Qualitative research could provide more in-depth insights into individual experiences and coping mechanisms. Increasing the sample size and ensuring geographic diversity would make the findings more representative. A correlational



study design would also be appropriate for studying associations between depression, coping mechanisms, and social adjustment. Socio-economic status as a demographic variable must also be included, as it would be an important determinant of mental health outcomes. Controlling for age category would enable more focused exploration of how various age groups react to post-pandemic stressors. Finally, making the Post-Pandemic Depression Scale available in various languages would expand its applicability and value across different groups.

## CONCLUSION

The current research was carried out on the population to assess post-pandemic depression, coping mechanisms, and social adjustment of males and females. There were two data collection rounds to determine the reliability of the post-pandemic depression scale. The results that were obtained indicate that there is no gender difference for depression, but post-pandemic depression, the p-value was nearly .05, but a gender difference existed. There is no difference in gender for coping strategies, and males had a greater social adjustment compared to females.

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## CONFLICT OF INTEREST

The author(s) declare no conflict of interest.

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