

A Comparative Study on the Coping Styles and Quality of Life of Selected Dentistry Students Enrolled in an Online Learning Modality in a Selected University

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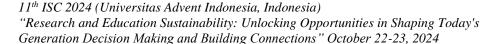
ABSTRACT

Online learning is part of the new normal of teaching in Dentistry, hence the aim of the study was to compare the different coping styles and quality of life of selected Dentistry students in a selected university. To accomplish the objectives, questionnaires were given to 1st year and 2nd year Dentistry students through convenience sampling using online surveys. All respondents were asked to complete Brief-cope and WHOQOLBref. The data were analyzed by Descriptive statistics using Mean, Standard Deviation, Frequency Test, and Mann-Whitney U Test. There was significant difference in the Coping Styles of the respondents when it comes to Approach Coping Styles of different genders. In addition, there was no significant difference in Coping Styles of the respondents when they are grouped according to Learning Environment, Year Level, and Geographic Location. Moreover, results of Mann-Whitney U test revealed that there was no significant difference in the Quality of Life of selected Dentistry students enrolled in Online learning when grouped according to learning environment, gender, and geographic location.

Keywords: Coping Style, Quality of Life, Online Learning Modality, Learning Environment

INTRODUCTION

Many students or most of the students are enrolled through online to continue their studies nowadays because of the recent pandemic, but there are also students who chose to study through answering modules. However, in some countries, online courses are widely used even before the pandemic happened. However, there are lot of factors to consider for you to learn and for you to have quality learning through online learning modality. You need to have a technology or mobile device that can access to your mode of learning through online and you also need to have a stable internet connection for you to have quality education from the





lectures that were given online. More and more students are choosing to take their lessons online. They find the conventional classroom setting to be constrictive, rigid, and unworkable. With the progress of technology, schools may now deliver quality classroom instruction online. According to Paul and Jefferson, this shift forces Academic Institutions to reconsider how to implement their course content because of this change in the pedagogical medium. Online learning is done by giving lectures or discussions to the students through online and giving homework or assignments to evaluate if the students are getting quality education. These may be done through synchronous and asynchronous classes. With the advancement of our technological development, there is an increase of demands of students of higher quality programs that is accessible anytime and anywhere. Due to these demands, corporate executives, stay-at-home parents, and other comparable demographics now have a practical and enticing option in online education. According to Wladis et al, there are numerous other face values in addition to access and flexibility. Advantages, such as program choice and time effectiveness, have boosted the allure of distance learning. (Wladis et al., 2015). Online College Students (2019) conducted a survey for 1500 students that are in fully online academic programs. The majority of students (58%) claimed that they had made their discipline-specific study plans before deciding to study online. Additionally, more than three out of five students (63%) said Not because it was their "preferred method of learning," they had chosen to study online because it was the most convenient for their "present work/life responsibilities" (34 percent). In addition, 84% of the students agreed that their online education was worthwhile, indicating that they are receiving a high-quality education. Studies, however, have also demonstrated that for the majority of students, traditional methods or in-person instruction are more effective than the online learning modality. (Lederman 2019) Students who failed Algebra I in their second semester were randomly assigned to either face-to-face classes or online learning modality, and it was found that the student's credit recovery success rates and algebra test scores were lower in an online setting. Additionally, students who were assigned to the online learning modality also rated their course as more difficult than their peers who were assigned to the face-to-face classes (Heppen et.al 2016). If kids fail algebra, they may be able to catch up during the evenings or summer using online lessons, not disrupting their math trajectory at school. "Students who struggle will likely struggle more online." Online courses therefore almost certainly occasionally serve students well. (Heppen et.al 2016). Here in the Philippines, online learning modality became widely used only because of the pandemic that is happening but before, the face-to-face classes were mostly used to deliver quality courses and to give quality education. But unfortunately, face to face classes is not allowed at present due to the virus that is spreading rapidly. In these times, the students may not cope well with their learning or education because of the Quality of Life that they have nowadays. Some students are not fortunate enough to have a good internet connection or a mobile device or technology that will allow enough access for them to their online education that usually hinders them from having a quality education. For Dentistry students, most of their courses need face to face interaction because their classes are mostly laboratory classes. But now they are enrolled through online learning modality because of the pandemic that is happening. The students are likely to take only lecture subjects because face to face interaction is not allowed and by the time that they will take their laboratory classes that they missed, their learning or the concepts in a particular subject or course might have been forgotten already. This study aims to discuss about the

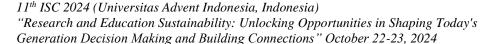




Coping Styles and the Quality of Life of selected dentistry students enrolled in an online learning modality in a selected private university

LITERATURE REVIEW

The American Psychological Association defined Coping Styles (also known as Coping Strategies) as an action or a series of action or thought processes that is used in an event or when dealing in a stressful situation that will allow an individual to adapt in such situations. According to Skinner, et. al, coping is one of the most integral processes that allows individuals to adapt and survive but it also mitigates the negative effects of stress on one's physical and mental health and functioning and influences the emergence of psychopathology and resilience. (Skinner, et.al, 2016). In 2016, it was suggested by the research of Smith, et. al, that some coping styles reduce stress and encourage psychologically healthy outcomes, whereas others worsen stress and encourage detrimental psychological effects, but the efficacy of such strategies are heavily reliant on the individual's personal resiliency because it is a moderator, enhancing the effectiveness of task-oriented coping and buffering against any negative effects. It is linked to greater use of task-oriented coping strategies, which 10 ` in turn were associated with more adaptive outcomes, and less reliance on nonconstructive emotion-oriented strategies. (Smith, et. al 2016) Freire, et. al emphasizes on the importance of promoting an effective Coping Styles on a university population due to psychological concerns for students, because of their research showing that students are more likely to independently use coping mechanisms, such as making a plan of action, considering the good elements of the situation, or asking for help and support from others, when their teachers foster the development of selfregulation abilities in them. (Freire, et. al 2020) A study conducted in 2016 by Bello, et. al used a Purposive Sampling technique with 120 dental students as respondents to determine the correlation between stress and the coping strategies applied to the academic performance of Dentistry students. Results show that stress does not affect a Dentistry student's academic performance, however, results also demonstrate that among the avoidance strategies dentistry student uses, avoidance coping does affect to the academic performance. This implies that the more the student avoids handling the problem, the lower the academic performance becomes. (Bello, et. al 2016) A survey study conducted by Kwaah and Essilfie in 2017, revealed that majority of the distance education students in their selected turn to prayer, taking steps to reduce pressures, seeing the positive in events, learning from their mistakes, and receiving emotional support from friends and family which is a positive coping mechanism however minority of these students do resort to tobacco, alcohol and drugs to cope with their stress which may have resulted to lack students support services that could design 11 `a program that promotes different Coping Styles that would reduce the stress among these students (Kwaah and Essilfie 2017). Zvauya et al conducted a study on 2017 on the burn out levels as well as the use of Maladaptive (Avoidant) Coping across year levels of postgraduate specialties including pre and para medical clinical departments. Comparing 2nd year residents to 1st and 3rd year residents, 2nd year residents scored highly on burnout measures. It was found that the frequency of the maladaptive coping styles increased along with the degree of emotional weariness and depersonalization, which ranged from low to high. In Bangladesh, Ali et. Al (2020) performed a study on the difficulties rural students faced adapting to metropolitan





universities and their coping styles. The findings indicate that students from remote locations have more trouble adjusting to an urban setting than students from adjacent locations. Quality of Life According to the World Health Organization, Quality of Life refers to the state of complete physical, mental, and social well-being and not just the absence of disease (WHO 2020). When applied specifically for students, Quality of Life is the primary factor and measure of the emotional state brought on by a person playing the role of a student that affects one's subjective assessment of the level to which his or her most crucial needs, goals, and wishes have been met. (Encyclopedia of Quality of Life and Well-Being Research). This would suggest that a student's Quality of Life affects the student's motivation to learn and influences their effort to fulfill their responsibilities. 12 ` In 2017, results from the study of Nur, et. al suggest that HRQOL is much higher on students living in metropolitan regions, non-smokers, those with acceptable amounts of pocket money, and those with higher BMI index, socioeconomic, demographic, and behavioral factors have an impact on university students. (Nur, et. al 2017). Barayan, et. al in 2018 conducted a survey with 2,516 female university students to assess their HRQOL using self-administered questionnaires with sections relating to sociodemographic and Internet addiction. Results presents sociodemographic factors such as parental educational level, and family income and problematic Internet use affects 2/3 of the respondents HRQOL, however the results may have a positivity bias problem due to the results limited to self-assessment. (Barayan, et. al, 2018). In relation to the Brayan et. al study, Another research by Ceratti et. al wherein 203 medical students answered questionnaires related to selfawareness and coping strategies. The majority of the medical students' self-perceived Quality of Life scores are overestimated, according to the results, given that most of them stated that they are aware of their own needs and that their thoughts and actions are consistent. This demonstrates positivity bias and may prevent them from seeking assistance or making necessary changes. (Ceratti, et, al 2020). Online Learning Modality The Kansas State University defined Online Learning Modality as a type of Learning approach in which all lectures, exercises, and learning delivery occur online via asynchronous activities, synchronous sessions, or a mix of both asynchronous and synchronous techniques. (Kansas State University 2020). 13 ` A survey-based study, conducted by Fidalgo, et. al in 2020, tackles student's perception of distant education. Results show that the major concerns of students participating in a distant learning program includes time management, motivation, and English language skills however such concerns did not diminish the student's in taking such courses (Fidalgo, et. al 2020). In 2019, Paul and Jefferson have conducted a comparative analysis of students' performance in an online environment and a face-to-face environment. The study found no statistically significant differences in performance between online and traditional classroom students in a science concepts course for non-STEM majors based on modality, gender, or class rank, indicating that online students and face-to-face students are able to perform at the same level and that teaching modality may not matter as much. (Jefferson, Paul 2019). According to Chua et. Al's study of the status of the implementation of E-learning in selected higher education institutions in the Philippines (Region IV-A) in 2020, the system is deficient in several areas that should be addressed to implement E-learning properly, such as the faculty members' and students' lack of training. Despite of this, professors and students could easily adapt to these new changes to align themselves in the 21st century skills of learning (Chua, et al., 2020). (Chua, et, al 2020). In the field of dental education, Azeem, et. al conducted a



research based on the perceptions of orthodontic residents on online learning with 50 orthodontic resident participants which shows a 100% positive response regarding online learning (Azeem, et. al 2020). 14 ` A study by Goldman on The Coping Mechanisms and Perceived Stress of University Members during the Covid 19 pandemic indicated that majority of their respondents experienced more stress during the pandemic in which Online Learning Modalities were fully implemented. (Goldman 2021)

METHODS

Research Design

In this study the researchers used Quantitative Research. Descriptive and Correlational Design was used to assess and compare the Coping Styles and Quality of Life of selected dentistry students enrolled in online learning at a university. Descriptive design examines the characteristics of one population to generate hypothesis and develop theory (Bansal et.al 2016). Correlational Design examines the relationship between different variables (Jha et.al 2015). The researchers collected online information from the respondents using survey questionnaires and analyzed the results using statistics with Descriptive Correlational Pattern. This determined and helped in comparing the relationship between Coping Styles and Quality of Life as it correlated to online learning of Dentistry students. This established the significance of gender, year level, learning environment and geographical location of Dentistry students as modifying factors to the dependent and independent variable.

Population and Sampling techniques

The respondents of the study were the Dental students of the Adventist University of the Philippines. 1st and 2nd year Dental students (DMD 1 and DMD 2) that are exclusively enrolled in online classes participated in the study. Dental students that are not from Adventist university of the Philippines did not participate in the study.

Convenience sampling was utilized to select the Dental students within the selected University. Convenience sampling is a non-probability sampling technique where members of the target population meet a certain criterion such accessibility, geographical proximity, availability at a given time or the willingness to participate are included for the study (Etikan, et. al, 2016). This technique was used to select 60 respondents from DMD 1 and DMD 2 according to their accessibility and willingness to participate. However, only 56 of the 60 respondents were able to answer and participate the study. Some students already changed their program and was not part of the College anymore therefore cannot participate in the study.

Instrumentation

The instrument that the researchers used was an online survey form. The questionnaires that the researchers utilized were the Brief-Cope questionnaire for measuring effective or



ineffective ways of coping and the World Health 21 Organization Quality of Life – Bref or WHOQOL-BREF questionnaire for measuring the Quality of Life of the respondents. These instruments were used in the collection of data.

BRIEF-Cope

The BRIEF-Cope is a 28 item self-report questionnaire derived from the original 60 item Cope scale by Carver (1989). The scale can determine someone's primary Coping Styles as either Approach Coping or Avoidant Coping. Coping styles like Active coping, Emotional support, use of informational support, Positive reframing, Planning and Acceptance are involved within Approach Coping. Other Coping Styles like Self-distraction, Denial, Behavioral disengagement, Venting and Self-blame are included in Avoidant Coping. This questionnaire used closed-ended questions which measures the frequency of the Coping style which the respondent uses. This can be answered by only choosing from: I've been doing this a lot, a medium amount, A little bit and I haven't been doing this at all. Also, items 4 and 11 will be eliminated due to cultural considerations. This questionnaire used an Even Likert scale or a 4-point Likert scale to force respondents to answer with no neutral choice. This enabled the researchers to get specific response.

WHOQOL-BREF

The World Health Organization Quality of Life – BREF or WHOQOL-BREF is an abbreviated version of the WHOQOL-100 Quality of Life assessment. It produces scores for four domains related to Quality of Life: Physical health, Psychological health, Social relationships, and Environment, which was found to be an appropriate instrument to use for Quality of Life assessment. It is composed of 26 close-ended questions that can be answered by choosing from a 5-point Likert scale. Question #1 and #15's options was about the quality of life thus the choices will be Very poor, Poor, Neither poor nor good, Good, and Very good. This measured the respondent's perception of their quality of life. Following that, Question #2, #16 - #24's option was about the respondent's satisfaction with their health status. The participants chose from Very dissatisfied, Dissatisfied, Neither satisfied nor dissatisfied, Satisfied, and Very Satisfied.

Some of the questions asked about frequency of certain situation. Choices were Always, Very often, Quite often, Seldom and Never. However, the researchers decided to eliminate a question (Q. 21) regarding the respondent's sexual life due to its cultural considerations. The respondents are going to be instructed to answer the questions according to what they have felt for the last 6 weeks after the start of the Second Semester. For the first part, the researchers gave instructions to the participants to honestly answer the questionnaires and assured them that all their answers were used for the purpose of this study only and is confidential. The first part involved their demographic profile: Names, Gender, Year level and their Current Address. For the second part, was the Brief-cope questionnaire which had 28 items, but the researchers gave instructions to not answer items 4 and 11. The participants chose from I've been doing this a lot, A medium amount, A little bit & I haven't been doing this at all. After answering the



Brief-Cope questionnaire, the WHOQOL-BREF assessment followed which comprised of 25 questions. The researchers also gave instructions to the participants to answer the questionnaire according to what they felt for the last 6 weeks after the start of the second semester and to not answer question 21. The instruments were convenient for both the researchers and respondents as it did not take much of their time to answer and was not given face-to-face due to current world situation. The research instruments were also suitable that enabled the researchers to gain details about the respondent's situation.

Interpretation of WHOQOL-BREF Response

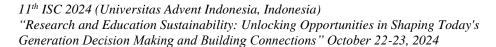
Range	Response	Verbal Interpretation
3.26 - 4.00	I've been doing this a lot	High
2.51 – 3.25	A medium amount	Moderately High
1.76 – 2.50	A little bit	Moderately Low
1.00 - 1.75	I haven't doing this at all	Low
	3.26 - 4.00 2.51 - 3.25 1.76 - 2.50	3.26 - 4.00 I've been doing this a lot 2.51 - 3.25 A medium amount 1.76 - 2.50 A little bit

^{`*}This table reflects the scoring system that will be used for interpretation of scores for WHOQOL-BREF questionnaire.

Data Gathering

The researchers wrote to World Health Organization after the proposed study was approved. In addition, a letter was addressed to the department chair and college dean of a particular university in Silang, Cavite, requesting for their permission to use their questionnaire in our study. Respondents were given internet access to the survey questionnaires. After providing the respondents with the questionnaires online, the researchers also discussed the goals and purpose of the study and urged them to get in touch with them if they had any questions. The survey questionnaires that were returned once the data collection was complete were permanently deleted by the researchers to safeguard the secrecy of the respondents' identities.

Ethical Considerations





The privacy and confidentiality of the information gathered from the respondents through the survey questionnaires are kept confidential and private. The respondents were informed about the study's objectives and purpose. The information gathered from the respondents through survey questionnaires were used to compare the quality of life and different Coping styles of Dentistry students in a selected private University. Participants were given twenty pesos worth of load as a form of compensation. This was to aid the participants to answer the questionnaires online, in an event where they have no access to the internet and must utilize mobile data in order to participate.

Analysis of Data

Mean and Standard Deviation were utilized to know the Coping Style and Quality of Life of the respondents. This were also used to test for the first and second hypothesis. In this way, the researcher was able to have a clear understanding of the Coping Styles that were used by the respondents and the status of their Quality of Life. Frequency Test was utilized to analyze the number of occurrences in regard to answering the first problem. And to further have a clearer understanding of the values from the data, the Criterion method was used.

To answer the third and fourth problem, the researchers used the Mann-Whitney U test. This was used to know whether there is difference in one dependent variable with two independent groups as defined by Papadimitriou & Marshall. This test showed how the moderating variables such as Learning environment, Gender and Year Level affected the other variables of the study. This presented the possible changes to the association between the Coping styles and Quality of Life.

The researchers utilized Descriptive Statistics as method for evaluation of data gathered from online information. It will assist in measuring if there is a significant difference between variables which is Coping Styles and Quality of Life of dentistry students with Gender, Year Level and Learning Environment in response to online learning. This method aided in summarizing the data, interpreting results, and drawing conclusions obtained from the population. Descriptive Statistics was utilized by the researchers to simplify the results of the data. The purpose for this is to be able to present the data in a manageable way that made it easier to understand.

RESULTS AND DISCUSSION

Coping Styles of the Respondents

The research problem of this study is focused on the Coping style and Quality of life of the respondents. Approach Coping style can be further categorize into: Active Coping, Emotional Support, Use of Informational Support, Positive Reframing, Planning and Acceptance while Avoidant Coping Style includes Self-Distraction, Denial, Behavioral



disengagement, Venting and Self-blame. As for Neither, it includes Humor and Religion because it can't be group into Approach or Avoidant Coping style.

As shown in Table 3, there is little difference between each Coping styles which may mean that (1) The respondents do not feel they have many stressors to cope with, (2) There is a lack of reflective capacity or resistance to disclose personal information and/or (3) The respondents do not have many coping skills. (NovoPsych, 2021). Therefore, there is significant difference in the coping styles between the selected dentistry students. As little difference as it shows, Approach Coping Style is the most frequently used Coping style by the respondents. For this study, the researchers wanted to know the different coping styles of the respondents, and as stated earlier, the researchers had utilized the coping styles in the Brief-Cope questionnaire. It provided the answer for that specific question: Approach Coping style, Avoidant Coping style and neither.

Quality of Life of the Respondents

The World Health Organization Quality of Life-Bref has a four-domain structure. Domain 1 focuses on physical health, which includes, as its name implies, a variety of physical health-related topics like daily living activities, dependence on medications and other drugs, mobility, energy and fatigue, work capacity, pain and fatigue, and sleep and rest. Domain 2—also referred to as the Psychological Domain—comprises the following areas: thinking, learning, memory, and focus. Body image and appearance. Positive and negative emotions. Self-esteem. Spirituality. Social Relationships, which make up Domain 3, include support from others and personal relationships. The last domain, Environment, includes financial resources, freedom, physical safety and security, health, and social care: accessibility and quality, home environment, opportunities for learning new information and skills, participation in and opportunities for leisure activities, physical environment (pollution, noise, traffic, and climate), and transportation. (Khan et. Al 2003)

Table 4				
WHOQOL-	N	Mean	SD	VI
Bref Results				
and Verbal				



Interpretation

QOL Domain

Domain 1	56	11.5	2.18	Moderately
(Physical				Low
Health)				
Domain 2 (Psychological)	56	13.5	13.5	Moderately High
Domain 3	56	15.5	2.77	Moderately
(Social				High
Relationship)				
Domain 4 (Environment)	56	14.3	2.38	Moderately High
(Environment)				mgn

As presented in Table 4, three of the domains have a high interpretation meaning that respondents have a high quality of life regarding this aspect. However, among the domains, the third domain which is the Social Relationships have the highest mean score (15.5) and having the lowest mean (11.5) is domain 1 which is the Physical health. Therefore, it rejects the hypothesis 2 which stated that there is no significant difference in the Quality of Life between the selected Dentistry students. Physical Health is greatly affected. Due to restrictions implemented by the government, daily activities of the respondents are changed significantly. This implies that the respondents are experiencing challenges regarding their Physical health. It may be due to increased concern about their health and their loved ones, feeling restless causing sleep deprivation, or minimized activities due to lockdowns. Moreover, in 2020, Teixeira et.al stated that practicing physical activity has always been associated with higher QoL among Dentistry undergraduate students. However, in pandemic times, staying active and productive has not been an easy task.

Coping Styles and Learning Environment



During the Covid-19 Pandemic, students faced a drastic change with their learning environment. From living in the dorm, some of them have traveled back home to be with their families and to continue taking their classes. While others remained living in the 32

dorms due to travel restrictions. Students may feel less connected to their friends organizations, and hobbies if they are excluded from their social support system and extracurricular activities at school. A person may become fearful for their future, their health, and the futures of their friends and loved ones as a result of this. They are particularly susceptible to developing mental health issues because of the stressful and anxiety-inducing circumstances they are going through. The results presented in shows that only 5 of the respondents were living inside the Campus while 51 of them were living off campus. Results shows that there is no significant difference between the Coping styles and Learning Environment of the respondents which contradicts the study of Nurunnabi et. al in 2020, which states that hose staying in rented apartments were more likely to experience severe anxiety than those staying at home, suggesting that staying away from family can make students feel mentally worse. (Nurunnabi, et. al, 2020). Therefore, it accepts the researchers' hypothesis 3 which states that there is no significant correlation between students enrolled in an online learning modality and their developed coping styles. This also means that it accepts the researcher's hypothesis 3 which stated that there is no significant correlation between the students enrolled in an online learning modality and their develop Coping style. It also showed that there is no difference in the Coping styles of those students living in-campus or off-campus. Living On-campus makes them learn to be independent, being able to handle challenges on their own and adjusts to certain regulations imposed throughout the campus. Social relationships are gained along the way as they interact with fellow board mates as stated by Suyu-Tattao in 2016.

Coping Styles and Year Level

The results shows that there are no significant differences of Coping Styles of Dental Students based on their year level. The results contradict the study of Zvauya (2017) stating that second year university students tend to use avoidant coping styles, because of increased responsibilities, the use of maladaptive (avoidant) coping styles increases as the year level of students increases. Result being insignificant may have been affected to do with the difference of the course curriculum as well as the environment of the university.

Coping Styles and Gender

The Result presents a significant difference in the Approach Coping Style with The Female Groups having a higher mean than the Male groups. Therefore, there is a significant difference in the Coping Styles of selected Dentistry students. An Approach Coping Style is described as a problem-solving coping approach (Dubow 2016). A study conducted by Janey in 2017 suggests that in order to control their emotions, women frequently employ more unhealthy emotion-focused coping styles than males, such as rumination, asking for assistance, and sobbing. Another study in 2017 by Howerton also showed that people who are less depressed typically employ more approach-oriented techniques because they are, in essence, more



capable of employing active coping techniques in addition to that a study by Puyat et al in December 2020 showed that young women in the Philippines are more likely to be depressed than the young men. This means that despite multiple studies having the same conclusions, the results of this table have contradicted what the latest literature suggests. One may consider the course the students were taking as well as the environment of the University have affected the results. Avoidant and Neither Coping Styles have insignificant results meaning there are no gender differences on the Avoidant and the Neither Coping Styles between male and female 1st and second year Dental Students.

CONCLUSION, IMPLICATION, SUGGESTION, AND LIMITATIONS

Based on the results, There is a significant difference in the Coping Styles of the Respondents when it comes to the approach of different genders. However, it is only in that category where it showed a significant difference. There is no significant difference in the Coping Styles of the respondents when they are grouped according to their learning environment, year level, and geographic location. The researchers accepted that there is no significant difference in the quality of life between the selected dentistry students when they are grouped according to their learning environment, gender and geographic location. Recommendations Feedback on different Coping styles of Dentistry students may be considered on how it affects the Quality of life and online learning since the pandemic. Professors should be more mindful about the student's current situation during Online classes. This study can also help in strengthening the Guidance Office's communication with the Off-Campus and In-Campus students so that they may give further assistance to all the students regarding their Coping Styles. Thus, it may help the Guidance staff and Professors to guide students into adapting and using more of the Approach Coping Style to help students achieve more positive outcomes when facing challenges in their lives. Private universities may have to implement certain restrictions to further improve the status of online learning for a balanced education for students and professors in dentistry. Future researchers may evaluate the study to further improve and assess other factors to consider. The researchers strongly advise the future researchers to have an equal number of participants for In-Campus and Off-Campus students, and to give a test during the start and end of the semester to be able to make a comparison for the Coping Styles and Quality of Life of their participants. The study may also be done to other respondents such as those DMD 3 and 4 in which they could have an even distribution of materials, those students who were formerly residing at the dorms and then went to live off-campus, and to consider the interests of their participants: preferring Online Gaming to Physical/Sports Activities, by other colleges not just in Dentistry and be distributed to a greater number of respondents and consider other solutions to gauge the Coping styles and Quality of life of students with response to online learning in different courses



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