

Stress and Coping Strategies Related to Pubertal Challenges Among Adolescents: A Systematic Review

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Abstract

Background: Physical, psychological, emotional, cognitive, and social changes occur quickly during puberty, a crucial growth stage. Adolescents are frequently exposed to a variety of stressors as a result of these changes, such as issues with body image, hormone changes, peer pressure, academic pressure, parental expectations, bullying, social media influence, and sexual maturation. Teenagers use a variety of coping mechanisms to deal with these stressors, from maladaptive behaviours (avoidance, substance abuse, self-harm, excessive internet use) to adaptive ones (problem-solving, social support, emotional regulation). Designing successful school- and community-based interventions requires an understanding of these coping strategies. **Objective:** To thoroughly examine the body of research on stress and pubertal difficulties in teenagers and determine the coping mechanisms they use. **Methods:** The PRISMA 2020 guidelines should be adhered to. Predefined keywords should be used while searching electronic databases like PubMed, Scopus, Web of Science, PsycINFO, CINAHL, and Google Scholar. Included should be observational, qualitative, mixed-method, and interventional studies with teenagers between the ages of 10 and 19 that have been published in English. Two reviewers should separately extract the data and evaluate the quality. **Results:** It is anticipated that the review would show that pubertal changes, body image dissatisfaction, peer pressure, academic demands, menstrual worries for girls, voice changes and muscular development for boys, cyberbullying, and family expectations cause significant stress for teens. Seeking social support, exercising, practicing mindfulness, engaging in religious activities, positive reframing, and problem-focused coping are examples of adaptive coping strategies that are commonly reported. Avoidance, emotional repression, internet addiction, hostility, smoking, drinking, and self-harm are examples of maladaptive coping mechanisms. **Conclusion:** Improving adolescent well-being requires early stress detection and the encouragement of healthy coping mechanisms through school health programs, family support, and mental health interventions.

Keywords: Adolescents, Puberty, Stress, Coping Strategies, Psychological Well-being, Mental Health, Systematic Review

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Review Question (PICO)

Component	Description
Population	Adolescents (10–19 years)
Exposure	Pubertal challenges and stress
Comparison	Different coping strategies or no comparison
Outcome	Stress levels, coping strategies, mental health outcomes

Objectives

1. To identify major sources of stress related to pubertal changes among adolescents.
2. To examine coping strategies adopted by adolescents during puberty.
3. To identify factors influencing effective coping.
4. To summarise evidence for interventions that improve stress management during puberty.

Inclusion Criteria

- Adolescents aged 10–19 years.
- Studies examining pubertal stress and coping.
- Quantitative, qualitative, mixed-methods, and intervention studies.

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- English-language publications.
- Peer-reviewed articles.

Exclusion Criteria

- Studies involving adults only.
- Editorials, letters, commentaries.
- Conference abstracts without full text.
- Non-English publications.

Search Strategy

("Adolescent"[MeSH] OR adolescent* OR teenager* OR youth)

AND

(puberty OR pubertal OR puberty-related changes OR sexual maturation)

AND

(stress OR psychological stress OR emotional stress)

AND

(coping OR coping strategies OR resilience OR adaptation)

Databases

- PubMed
- Scopus
- Web of Science
- PsycINFO
- CINAHL
- Embase
- Google Scholar

PRISMA Flow Diagram (Template)

Records identified from databases (n = 1,250)



Duplicates removed (n = 250)



Records screened (n = 1,000)



Records excluded (n = 820)



Full-text articles assessed (n = 180)



Full-text articles excluded (n = 145)



Studies included in qualitative synthesis (n = 35)

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Studies included in quantitative synthesis (Meta-analysis if applicable) (n = 20)

Data Extraction Table

Author	Country	Design	Sample	Stressor	Coping Strategy	Key Findings
Author, Year	India	Cross-sectional	450	Body image	Family support	Reduced stress
Author, Year	USA	Qualitative	32	Menstruation	Peer support	Improved coping
Author, Year	China	Cohort	700	Academic pressure	Problem-solving	Better mental health

Quality Assessment

Appropriate tools include:

- Joanna Briggs Institute Critical Appraisal Tools (cross-sectional, cohort, qualitative studies)
- Critical Appraisal Skills Programme Checklists (qualitative studies)
- National Institutes of Health Study Quality Assessment Tools
- Cochrane Collaboration Risk of Bias tools (interventional studies)

Sources of Stress

- Physical changes during puberty
- Menstrual challenges
- Body image dissatisfaction
- Acne and skin concerns
- Voice changes
- Peer pressure
- Bullying
- Social media comparison
- Academic stress
- Family expectations
- Gender identity concerns
- Romantic relationships

Adaptive Coping Strategies

- Problem-solving
- Seeking family support
- Peer support
- Teacher support
- Physical exercise
- Meditation
- Mindfulness
- Yoga
- Religious or spiritual practices
- Music
- Journaling
- Positive thinking

Maladaptive Coping Strategies

- Avoidance
- Social withdrawal
- Internet addiction
- Gaming addiction
- Smoking
- Alcohol use
- Substance use

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- Aggression
- Self-harm

Potential Research Gaps

- Limited longitudinal studies on pubertal stress.
- Insufficient evidence from low- and middle-income countries.
- Few intervention studies evaluating coping-skills programs.
- Underrepresentation of boys' pubertal experiences.
- Limited focus on LGBTQ+ adolescents.
- Lack of culturally tailored coping interventions.

References

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