

**IMPACT OF COPING STRATEGIES ON THE QUALITY OF LIFE AND  
EMOTIONAL REGULATION AMONG PSORIAIS PATIENTS**



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**2020**

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**THIS THESIS SUBMITTED**  
**BY**  
**AAISHA SHAUKAT**  
**IS ACCEPTED BY THE BAHRIA UNIVERSITY ISLAMABAD**  
**IN PARTIAL FULFILLMENT OF THE REQUIREMENT FOR THE**  
**DEGREE OF MASTER OF SCIENCE IN CLINICAL PSYCHOLOGY**  
**2020**

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**Dated: 19<sup>th</sup> October,2020**

**ALL THE PROCEDURES FOLLOWED AND MATERIAL USED  
WERE REVIEWED AND APPROVED BY THE HIGHER  
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**2020**

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**EXAMINER**

**Dated: 19<sup>th</sup> October 2020**



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**DEDICATION**

*I cordially dedicate my thesis to*

*My beloved Parents*

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**LIST OF ABBREVIATIONS**

QOL	Quality of Life
ER	Emotion Regulation
CS	Coping Strategies
WHO	World Health Organization
PFC	Problem Focused Coping
EFC	Emotion Focused Coping
DLQI	Dermatology Life Quality Index

### Abstract

*The following study was conducted to examine the impact of coping strategies on the quality of life and emotional regulation among psoriasis patients. The research was carried out on a sample of N=150 (m=58) (f=92) psoriasis patients age 18 and above. A snowball sampling technique was used. Questionnaires were dispatched through google forms. Data was collected online following the COVID-19 safety guidelines. The Coping style scale (Zaman & Ali,2015) was used to assess coping strategies, The Dermatology Life Quality Index (Finlay & Khan,2004) was used to measure the quality of life, and The Emotion Regulation Questionnaire (Kausar & Khan,2014) was used to assess emotional regulation. Reliability coefficients for all scales was high, coping style scale estimates were (PFC=.82 & EFC=.84), ERQ estimates were (ERQ Suppression=.75 & RTQ Reappraisal=.84) and DLQI estimates were (.82). Results revealed a positive significant relationship between ERQ suppression, ERQ reappraisal, and PFC ( $p=.252^{**}$  &  $p=.298^{**}$ ) and a positive relationship between ERQ reappraisal, PFC, and EFC ( $p=.169^{*}$  and  $p=.493^{**}$ ). Findings also revealed a positive relationship between DLQI and PFC ( $p=.178^{*}$ ) while a negative relationship between DLQI and EFC ( $p=-.491^{**}$ ). Results also revealed that CS is a predictor of QOL ( $R^2=.303$ ,  $p<.003$  &  $p<.000$ ), EFC is a non-significant predictor of ERQ Suppression ( $R^2= .094$ ,  $p<.305$ ), PFC is a predictor of ERQ Suppression and CS predicts ERQ Reappraisal ( $R^2 =.094$ ,  $p<.000$ ). Furthermore, results reveal that CS is a significant predictor of ERQ reappraisal ( $R^2= .275$ ,  $p<.038$  &  $p<.000$ ). Males use more ERQ Suppression while females use more ERQ Reappraisal. Males use more PFC while females use more EFC. The*

*study will help in highlighting the importance of coping strategies on psoriasis patient's ER and QOL.*

**Keywords:** *Psoriasis, Coping Strategy, Quality of life, Emotion Regulation*