

From Strain to Strategy: Exploring Perceived Stress and Coping Mechanisms Among Medical Postgraduate Residents in Maharashtra: Reg No: 44

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ABSTRACT

Background: Residency training involves significant academic and clinical pressures, often leading to persistent stress that can compromise both resident well-being and patient care. This study aims to estimate the burden of perceived stress, identify adaptive and maladaptive coping mechanisms, and explore associated socio-demographic and residency-related factors among medical postgraduate residents in Maharashtra. **Methods:** A multi-centric cross-sectional study was conducted among 236 postgraduate medical residents (MD/MS/DNB) across teaching hospitals in Maharashtra. Data was collected using a structured, self-administered online questionnaire incorporating socio-demographic variables, the Perceived Stress Scale-10 (PSS-10), and the Brief COPE Inventory (28 items). **Results:** Significant disparities in perceived stress levels were observed based on department type, institution type, and workload. Residents in clinical departments exhibited significantly higher mean stress scores (24.31) compared to those in non-clinical departments (18.78, $p < 0.001$). Furthermore, residents in government (23.52) and semi-government (23.57) institutions reported higher stress than those in deemed institutions (15.59, $p < 0.001$). The frequency of emergency duties per week was strongly associated with elevated stress levels ($p < 0.001$). Variables such as gender, marital status, and year of residency showed no statistically significant association with perceived stress. Subscale analysis revealed a prominent use of maladaptive coping strategies, with self-blame showing a strong correlation with higher stress levels. **Conclusion:** There is a high prevalence of perceived stress among medical residents, significantly exacerbated by clinical workloads, government institutional settings, and frequent emergency duties. The notable reliance on maladaptive coping mechanisms underscores the urgent need for targeted systemic interventions, routine stress screening, and the integration of resilience modules into medical curricula.

KEYWORDS