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Original Research

Assessment of depression, anxiety and stress among school students

Pradeesh C.B.

Assistant Professor, Department of Community Medicine, Narayana Medical College, Nellore, India

ABSTRACT:

Background:Depression, anxiety, and stress among students are significant mental health concerns that can have profound effects on academic performance, social relationships, and overall well-being. The present study was conducted to assess depression, anxiety and stress among school students. **Materials & Methods:**520 school children of both genders were selected. A questionnaire including sociodemographic information and the Depression Anxiety Stress Scale (DASS) was used. They were classified as normal, mild, moderate, severe, and extremely severe depending on the scores. **Results:** Out of 520 subjects, males were 230 and females were 290. Depression was mild in 70, moderate in 20, severe in 10 and very severe in 10 children whereas 410 were normal. Anxiety was mild in 95, moderate in 22, severe in 8 and very severe in 5 children and 390 were normal. Stress was mild in 102, moderate in 13, severe in 15 and very severe in 5 children and 385 were normal. The difference was significant (P< 0.05). **Conclusion:** Given the high rates of stress, anxiety, and depression among these students, it is critical to identify symptoms of these conditions in this population and to refer them to specialized psychiatry centers for further evaluation and treatment in order to prevent harm to their ability to learn and grow. **Keywords:** anxiety, Depression, stress

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Corresponding author: Pradeesh C.B., Assistant Professor, Department of Community Medicine, Narayana Medical College, Nellore, India

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INTRODUCTION

Depression, anxiety, and stress among students are significant mental health concerns that can have profound effects on academic performance, social relationships, and overall well-being. Several factors contribute to the prevalence of these mental health issues among students:Students often face intense academic pressure, including high expectations to well in exams, assignments, extracurricular activities.1 This pressure can lead to feelings of stress, anxiety, and self-doubt.Many students experience significant life transitions when starting college or university, such as moving away from home, adapting to a new environment, and managing increased independence. These transitions can be challenging and may exacerbate feelings of anxiety and depression. Social dynamics, peer relationships, and social media can influence students' perceptions of themselves and their peers. contributing to feelings of social pressure, isolation, or inadequacy.2 The cost of tuition, living expenses, and student loans can create financial strain for students and their families, leading to worry, anxiety, and difficulty focusing on academics.Irregular sleep patterns, poor sleep quality, and sleep deprivation are common among students, often due to academic demands, social activities, part-time work, or technology use. Sleep disturbances can exacerbate symptoms of depression and anxiety.Unhealthy lifestyle habits, such as poor diet, lack of exercise, substance use, and irregular routines, can contribute to mental health problems among students.³

Depression, anxiety, and stress can impair cognitive functioning, including attention, memory, and concentration. Students may find it difficult to focus on lectures, study effectively, or retain information, leading to difficulties in understanding course material and performing well on exams. 4Mental health issues can decrease students' motivation and engagement in academic activities. They may lose interest in their coursework, skip classes, or withdraw from social interactions, which can negatively affect their learning experiences and academic achievement.5The present study was conducted to assess depression, anxiety and stress among school students.

MATERIALS & METHODS

The present study consisted of 520 school children of both genders. All gave their written consent to participate in the study.

Data such as name, age, gender etc. was recorded. A questionnaire including sociodemographic information and the Depression Anxiety Stress Scale (DASS) was used. Three self-reporting measures are included in the 42-item DASS questionnaire, which is intended to measure the negative emotional states of

stress, anxiety, and depression. The three scales each have fourteen items on them. Respondents were asked to rate how much they had experienced each state over the previous week using a 4-point severity/frequency scale. They were classified as normal, mild, moderate, severe, and extremely severe depending on the scores.Data thus obtained were subjected to statistical analysis. P value < 0.05 was considered significant.

RESULTS Table I Distribution of patients

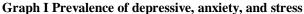
Total- 520					
Gender	Male	Female			
Number	230	290			

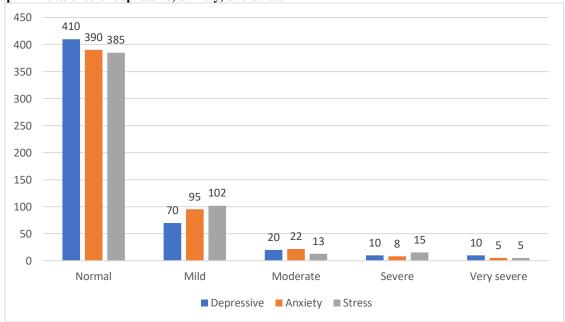
Table I shows that out of 520 subjects, males were 230 and females were 290.

Table II Prevalence of depressive, anxiety, and stress

Status	Depressive	Anxiety	Stress	P value
Normal	410	390	385	0.18
Mild	70	95	102	0.05
Moderate	20	22	13	0.42
Severe	10	8	15	0.94
Very severe	10	5	5	0.17

Table II, graph I shows that depression was mild in 70, moderate in 20, severe in 10 and very severe in 10 children whereas 410 were normal. Anxiety was mild in 95, moderate in 22, severe in 8 and very severe in 5 children and 390 were normal. Stress was mild in 102, moderate in 13, severe in 15 and very severe in 5 children and 385 were normal. The difference was significant (P< 0.05).





DISCUSSION

Students experiencing depression, anxiety, or stress may engage in avoidance behaviors, such as procrastination or avoiding challenging tasks, as a coping mechanism. This can result in incomplete assignments, missed deadlines, and poor time management, ultimately impacting their grades and academic progress. Mental health problems can also affect students' physical health, leading to fatigue, sleep disturbances, headaches, and other physical symptoms. These physical symptoms can further interfere with academic performance by reducing students' energy levels and ability to participate in academic activities. Depression, anxiety, and stress

affect students' social interactions and relationships with peers and instructors.8 They may experience social withdrawal, isolation, interpersonal conflicts, which can impact their sense of belonging and academic engagement.9Anxietyrelated symptoms, such as excessive worry, fear of failure, and physical symptoms like sweating or trembling, can manifest specifically during exams or other evaluative situations. Test anxiety can impair students' performance on exams, even if they have adequately prepared. 10 The present study conducted to assess depression, anxiety and stress among school students.

We found that out of 520 subjects, males were 230 and females were 290. Kumar et al¹¹ascertained the incidence of stress, anxiety, and depression among Imphal's 750 upper secondary school children. Every student at each of the seven randomly chosen schools was registered for the study. A questionnaire with the Depression Anxiety Stress Scale (DASS) and sociodemographic details was the research instrument utilized. Of 830 valid respondents, the prevalences of stress, anxiety, and depression were 21.1%, 24.4%, and 19.5%, respectively. 34.7% of respondents had all three of the negative states, and 81.6% of respondents had at least one of the illnesses under study. Females had higher than average prevalences of depression, anxiety, and stress; the prevalences of anxiety and stress were statistically significant (P = 0.00 and P = 0.04). Stress and despair were far more common among pupils in the 12th standard.

We found that depression was mild in 70, moderate in 20, severe in 10 and very severe in 10 children whereas 410 were normal. Anxiety was mild in 95, moderate in 22, severe in 8 and very severe in 5 children and 390 were normal. Stress was mild in 102, moderate in 13, severe in 15 and very severe in 5 children and 385 were normal. Sahoo et al¹² found the dimensional and categorical prevalence of present stress, anxiety, and depression symptoms among young adults. In order to be representative of the 50,000 college-bound children in the city, a stratified sample of 500 students was chosen, of which 405 were chosen for further examination. The Mini International Neuropsychiatric Interview was used to make categorical diagnoses and the Depression, Anxiety, and Stress Scale was used to measure symptoms on a dimensional basis. Students' average age was 19.3, and their average educational background was 14.7 years. Anxiety accounted for 24.4%, stress for 20%, and depression for 18.5% of the population, with symptoms ranging from mild to severely severe. 12.1% of the participants had clinical depression, and 19.0% had generalized anxiety disorder.Comorbid anxiety and depression was high, with about 87% of those having depression also suffering from anxiety disorder. Detecting depressive, anxiety, and stress-related symptoms in the college population is a critical preventive strategy, which can

help in preventing disruption to the learning process. Health policies must integrate young adults' depression, stress, and anxiety as a disorder of public health significance.

The limitation of the study is the small sample size.

CONCLUSION

Authors found that given the high rates of stress, anxiety, and depression among these students, it is critical to identify symptoms of these conditions in this population and to refer them to specialized psychiatry centers for further evaluation and treatment in order to prevent harm to their ability to learn and grow.

REFERENCES

- Al-Gelban KS. Depression, anxiety and stress among Saudi adolescent school boys. J R Soc Health 2007;127:33-37.
- Saluja G, Iachan R, Scheidt PC, Overpeck MD, Sun W, Giedd JN. Prevalence of and risk factors for depressive symptoms among young adolescents. Arch PediatrAdolesc Med 2004;158:760-65.
- Al-Gelban KS, Al-Amri HS, Mostafa OA. Prevalence of Depression, Anxiety and Stress as Measured by the Depression, Anxiety, and Stress Scale (DASS-42) among Secondary School Girls in Abha, Saudi Arabia. SQU Medical Journal 2009;9: 140-7.
- Grant KE, Compas BE. Stress and anxious-depressed symptoms among adolescents: Searching for mechanisms of risk. J Consult Clin Psychol1995;63:1015-21.
- Bhasin SK, Sharma R, Saini NK. Depression, anxiety and stress among adolescent students belonging to affluent families: A school-based study. Indian J Pediatr2010;77:161-5.
- Baviskar MP, Phalke VD, Phalke DB. Depression, anxiety and stress: A comparative study in Arts, Commerce and Science Junior College students in Rural Area of India. GRA 2013;2:183-5.
- 7. Bayram N, Bilgel N. The prevalence and sociodemographic correlations of depression, anxiety and stress among a group of university students. Soc Psychiatry Psychiatr Epidemiol 2008;43:667-72.
- 8. Iqbal S, Gupta S, Venkatarao E. Stress, anxiety and depression among medical undergraduate students and their sociodemographic correlates. Indian J Med Res 2015;141:354-7.
- 9. McGee R, Feehan M, Williams S, Anderson J. DSMIII from age 11 to 15 years. J Am Acad Child Adolesc Psychiatry 1992;31:50-51.
- Offord D, Boyle MH, Szatmari P, Rae-Grant NI, Links PS, Cadman DT. et al. Ontario Child Health Study II. Six-month prevalence of disorders and rates of service utilization. Arch Gen Psychiatry 1987;44:832-6.
- Kumar KS, Akoijam BS. Depression, anxiety and stress among higher secondary school students of Imphal, Manipur. Indian J Community Med 2017;42:94-6.
- Sahoo S, Chess CRJ. Prevalence of depression, anxiety, and stress among young male adults in India. J Nervous Mental Disease 2010;198:901-4.