

The Experience of Psychological Pain in Indian Young Adults

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ABSTRACT

Psychological pain can be defined as the emotional and cognitive distress caused by negative experiences or events, such as loss, failure, or rejection. It can also include feelings of shame, guilt, or worthlessness (Joiner & Rudd, 2000). This research examines if Indian young adults face psychological pain. The research was conducted on 23 young adults using a qualitative research design with a semi-structured interview method. The data collected was then analysed using thematic analysis and the themes found. Results showed that all the participants recognise and have experienced psychological pain. An insight into the relevance of Orbach's factors of mental pain were examined and it was observed that social distancing was the most common factor experienced by Indian young adults. Most participants agreed that psychological pain lingers long after the event causing the pain has passed, and that psychological pain can be worse than physical pain. The causes of such pain were found to be bereavement, breakup of a social relationship (romantic/platonic), and illness faced by the participant. Negative affect faced by the participants were discussed alongside somatic complaints endured, and the areas of life negatively affected by psychological pain, were also discussed. It was found that several participants felt that their psychological pain was not validated, however, almost half of the participants had a positive outlook on psychological pain, and hoped to become better, stronger people.

Keywords: *Psychological Pain, Validation, Indian Young Adults*

The International Association for the Study of Pain (IASP) in 2020 rephrased the definition of pain as "An unpleasant sensory and emotional experience associated with, or resembling that associated with, actual or potential tissue damage." However, this definition of pain has left out, in these author's opinion, a critical type of pain, pain that is not only a result of physical tissue damage. Pain that may be chronic or acute and very real. This pain can be thought of as 'Psychological Pain.'

Psychological pain

Psychological pain can be defined as the emotional and cognitive distress caused by negative experiences or events, such as loss, rejection, or failure. It can also include feelings of shame, guilt, or worthlessness (Joiner & Rudd, 2000). Psychological pain, termed by Mee in 2006, was initially called 'psychache' (Shneidman, 1993) and 'mental pain' (Orbach,

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2003), while other authors have also understood it as 'psychic pain' or 'emotional pain' (Heeringen et al. 2010, Mee et al. 2011).

Shneidman first introduced the concept as part of his theory of suicide. According to him, he conceptualised psychache as the "hurt, anguish, soreness, aching, psychological pain in the psyche, the mind" (Shneidman, 1993, p. 145). Over the years, various scholars have defined and described psychological pain. According to Verrocchio, Carrozzino, Marchetti, Andreasson, Fulcheri, and Bech (2016), it is a subjective experience marked by the impression of intensely unpleasant emotions. Nine factors of mental pain have been identified by Orbach et al. (2003), which are: confusion, lack of control, social distancing, narcissistic wounds, irreversibility of anguish, emotional flooding, freezing, estrangement, and emptiness. Psychological pain can be brought on by tragedies, traumas, unpleasant circumstances, and unmet basic needs. Psychological pain is distinct from physical pain, even though it may accompany it. There are no physical examination results, laboratory testing, or imaging examinations to determine its presence, there are no physical examination results, laboratory testing, or imaging examinations. This phenomenon can be understood only by speaking with the patient and hearing their account (Tossani 2013).

REVIEW OF LITERATURE

Edwin Shneidman in 1993 was first to conceptualise the concept of psychache and described it as 'how much you hurt as a human being'. He understood it as one of the core factors causing suicide. O'Connor and Nock in their paper on 'The psychology of suicidal behaviour' suggested that other psychological factors (e.g., depression) are relevant only if these factors are associated with psychache that acts as a mediator of other risk factors. Suicide "would not occur without psychological distress," claims Shneidman (1993). Although Roy F. Baumeister did not use the term "psychological anguish" specifically in his 1990 theory "Suicide as Escape from Self," he did speak of the painful realisation of one's own inadequacies as bringing irrationality and inhibition, "making dramatic actions more appealing." Psychological suffering, which includes negative emotions like pain, guilt, grief, and sadness, is a process of mental suffering. In cases where the psychological suffering is severe enough, suicide may seem like the sole option for overcoming a challenging mental issue. (Kovacs et al. 1975, Shneidman 1979, Osmond et al. 1984, Mee et al. 2006).

Mee et al. have put forth two theories (2006). First off, psychological suffering is a significant sign of depression and can help predict suicide conduct. Second, it is emphasised that brain imaging studies have a shared brain pathophysiology if subjective symptoms for physical and psychological pain are similar, but various subjective symptoms indicate that separate brain structures are engaged.

Thirty patients with depressive symptoms who had life-threatening physical conditions such heart attack, cancer, repeated surgical procedures, or significant injury were asked about their bodily and psychological anguish in the study conducted by Osmond et al. (1984). 28 individuals claimed that their psychological suffering was worse than any physical discomfort they had ever felt (Mee et al. 2006).

METHODOLOGY

Research Question: Do Indian young adults face psychological pain?

Research Design: Qualitative research with semi-interview method.

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Objectives

- To know if Indian young adults recognise psychological pain.
- To understand the experience of psychological pain in Indian young adults.
- To understand if their experience of psychological pain is validated.

Sample

The sample comprised twenty-three persons who were students of Kristu Jayanti College, Bengaluru, Karnataka, India aged between 18-24 years (Young adult). 65% were Females, 30% Males and 4% identified as Non-binary persons.

Instruments

Individual semi-structured interview method was used to gather data from the participants. The data gathered was examined using the thematic analysis technique (Braun & Clarke, 2006, pp. 77–101).

Procedure

Convenience and snowball sampling technique were used to locate the research participants. Google forms were used to provide a thorough information schedule intended to glean socio-demographic information about participants, state the participant criteria, and establish the client's informed consent. Individual Semi-structured Interview method was used. The participants were asked approximately 9 questions, with the questions being based on the research questions and objectives. The interviews were tape recorded with the participant's knowledge and consent, alongside which a reflective journal was maintained. The material was examined using the Qualitative Thematic Analysis Technique (Braun & Clarke, 2006, pp. 77–101) through which nine themes were identified. Informed consent was taken before data collection. The client was debriefed about the topics and the questions were shared with the client before data collection and client confidentiality was maintained throughout.

The nine structured open-ended questions are mentioned below:

1. Have you experienced pain? What does pain mean to you?
2. Do you think that pain can be a reaction to a psychological experience?
3. Have you experienced emotional and cognitive distress caused by negative experiences or events, such as loss, rejection, or failure? If you have, could you please elaborate on an experience?
4. What feelings were associated with this pain?
5. When experiencing psychological pain, have you felt confusion, lack of control, social distancing, irreversibility of anguish, emotional flooding, estrangement, and emptiness.
6. If you have experienced psychological pain, do you think that it has affected your academic performance? In a positive or negative way?
7. Do you think that this experience of psychological pain still lingers in you?
8. Was your experience of psychological pain validated?
9. Is there anything else you would like to add?

RESULTS AND DISCUSSION

Table 1: The codes and resulting themes gleaned from the data.

Sl. no.	Codes	Themes
1	i. Confusion ii. Lack of control iii. Social distancing iv. Irreversibility of anguish v. Emotional flooding vi. Estrangement vii. Emptiness	Israel Orbach's factors of mental pain (2003)
2	Worse than physical pain	Worse than physical pain
3	Pain that lingers	Pain that lingers
4	i. Pain caused by death ii. Pain caused by friendship iii. Pain caused by romantic relationship iv. Pain caused by illness	Causes
5	i. Loneliness ii. Denial/ emotional suppression iii. Exhaustion/ emotionally drained iv. Anger/frustration v. Flooding of thoughts vi. Anxiety vii. Low viii. Guilt ix. Betrayal x. Suicidal ideation	Negative affect
6	i. Sleeplessness ii. Lack of appetite iii. Emotional pain that hurts physically iv. Headaches	Somatic complaints
7	i. Daily life ii. Personality iii. Relationship with self iv. Breaking of spiritual self v. Social life vi. Academic life	Negative effect on areas of life
8	i. Validation of psychological pain ii. Invalidation of psychological pain	Validation of pain
9	i. Academic focus increased/same ii. Betterment of spiritual self iii. Positive outlook- hope, made into a better person, became stronger	Positive factors

The paper sought to find the answer to the research question, 'Do Indian young adults face psychological pain?' Previous research has sought to identify the concept of psychological pain and its factors (Shneidman, 1993; Joiner & Rudd, 2000; Orbach, 2003; Heeringen et al. 2010, Mee et al. 2011, Tossani, 2013) and studied it primarily in the clinical and suicidal population. However, the study of psychological pain in the Indian young adult population is

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limited. The present study aimed to delve into the Indian experience of psychological pain and whether this experience of pain feels validated.

Orbach et al. (2003), identified several different factors of mental pain, some being: confusion, lack of control, social distancing, irreversibility of anguish, emotional flooding, estrangement, and emptiness. The participants were asked if they had experienced any of these factors during their experience of mental pain. Results showed that social distancing was the most common type of mental pain experienced by the participants, with 82% of the participants mentioning that they either felt socially excluded, or themselves resorted to socially distancing from people. Emotional flooding was the second most common type of mental pain felt, followed by confusion, lack of control and irreversibility of anguish, emptiness, and estrangement.

All the participants of the study mentioned that in their understanding of pain is that it can be physical and psychological, with 30% of the participants claiming that it felt *worse than physical pain*, with a participant explaining their stand by saying that ‘physical pain can be reduced using some substances or medicines or something, but what will you do with the psychological pain?’. Several participants stated that psychological pain is worse than physical pain because ‘we don't forget that pain easily’ and that it tends to ‘extend for longer periods.’ An overwhelming majority of participants stated that *psychological pain lingers*. When asked to recall an emotionally painful situation, several participants were reminded of their childhood or adolescence. A participant disclosed that it is a ‘pain which will never go away’ from them with another saying ‘the pain definitely still lingers’, and that it had a ‘very deep effect’ on their self-esteem.

Causes for experiencing psychological pain

The results of this study suggests that the majority of young adults recalling facing psychological pain as a result of *deaths* in the family or of friends, and the second most common reason is strain or breakdown of social relationships, such as breakdowns or strain faced in *friendships or relationships*, and pain can even be caused by facing a *physiological illness*.

A participant who had faced the loss of a close friend observed that ‘Even though it's the person who was dying, or who's dead who has actually lost his life, the greater loss is for those that loved him’. This statement seems to ring true for a number of participants who grieved the loss of a friend or family member, stating that they experienced frequent panic attacks or felt themselves isolating themselves. These statements suggest that psychological pain is strongly associated with bereavement (Frumkin, Robinaugh, LeBlanc, Ahmad, Bui, Nock, Simon, & McNally, 2021).

Around 26% of the sample faced mental pain caused by tension or friendship breakups. Confusion appeared to be the most common negative affect felt by the participants ‘What is this that I'm feeling? I don't want to feel it anymore’, and this confusion often led to them feeling flooded by thoughts and questioning themselves. Participants stated that they questioned if the love they felt for their friends was reciprocated, they questioned themselves and if they could have done anything better, ‘why would they do it? Did I do something wrong? Was it a fault in my part?’ were some common questions asked by the participants when recalling moments of mental pain felt by them. These singular events often went on to shake their confidence in other friendships and they found themselves socially isolating themselves, and finding it hard to trust others, with a participant stating that while prior to

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the incident she was quite extroverted, her social life was deeply affected by this experience, 'I just became very quiet after that.' 17% of the participants stated that they felt 'traumatic' psychological pain due to a breakup of a romantic relationship, they stated that the rejection felt was painful because they knew that it was a conscious decision, 'you you get attached to a person and then a person chooses to leave...it was a very voluntary decision.' This sense of pain caused by social rejection is in line with research findings that suggest that social and romantic rejections activate the same neural network associated with pain arising from physical stimuli (Eisenberger & Lierberman, 2003; Fisher, Brown, Aron, Strong, & Mashek, 2010; Kross, Berman, Mischel, Smith, & Wager, 2011).

Guilt seemed to be a common negative affect felt by those who associate a period of psychological pain with facing an illness themselves, 'I felt you know, it's like I'm giving an extra load to the other person.' Guilt from being a burden to others has been studied in the case of patients in palliative care (Gudat, Ohnsorge, Streeck & Rehmann-Sutter, 2019), but these results show that individuals experience this guilt even during a short duration of a two to three weeks, when facing an illness, such as tearing a ligament.

Negative affect experienced

Negative affect refers to feelings of subjective emotional distress which includes a range of aversive affect states such as guilt, anger, fear, anxiety, and other unpleasant mood states (Watson, Clark, & Tellegen, 1988). In this study, certain common emotions were observed to be felt by the participants when asked to recall the emotions they felt during their time of psychological pain.

Loneliness was the most common emotional feeling, with around 70% of the participants reporting experiencing it, regardless of being surrounded by people they perceived as supportive or not. A participant explained, 'It wasn't like I was lonely because I had my friends,' but she still felt lonely because 'nobody really knew how I was feeling at that point.' This explanation applied to a lot of the participants who felt the same way and some preferred isolating themselves during this time.

Overwhelmed by their emotions, several participants felt like they were also cognitively being *flooded by thoughts* and were prone to overthinking the situation and outcome, which sometimes would lead to *anger and frustration* and *anxiety*. Some participants stated that they felt '*betrayed*', by others or even by God, for letting them go through the situation, with a participant mentioning 'I felt betrayal for some reason, probably because I expected God to like, you know, protect me'. A participant mentioned that he felt betrayed by his family members, 'I felt a bit betrayed in that. How could they move on so quickly?', which further led him to self-isolate. Few participants overcome by these feelings of anger, loneliness, and betrayal, were pushed to experience *suicidal ideation*.

Several participants stated that the situation causing them psychological pain caused them to feel '*low*' and *emotionally drained and exhausted*. They reported feeling like the overwhelming nature of emotions caused them to *suppress their emotions*, 'there was a lot of emotional suppression at that particular point in time.' Another participant mentioned that 'the emotion started getting so much that I had to kind of distract myself' and that he felt that his emotions and feelings had been 'pushed into my unconscious.' However, participants recognised that suppression of their feelings were not healthy for them either as 'that denial is also pain.'

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Somatic complaints

Somatic symptoms are the physical manifestations of emotional discomfort. When emotional or mental pain manifests in physical symptoms, the condition is referred to as somatization. (The American Academy of Child and Adolescent Psychiatry, 2017). Participants reported experiencing physical discomforts such as *sleeplessness* and *losing their appetite* during periods of psychological pain, as a participant mentioned that ‘I lost my weight also, for past six months. I don't have any food...and I really struggled to sleep also’. Several participants mentioned that their *emotional pain felt physical* to them, that she felt ‘very heavy by heart,’ while another participant felt like their heart was ‘breaking.’ Some participants even struggled with headaches and migraine, listing the cause as their psychological pain, ‘I had really severe migraine. So that emotional pain really had a physical effect on me.’

Areas of life negatively affected

Around 40% of the participants stated that their experience of psychological pain affects their daily life functioning, with a participant explaining that she ‘can't do your daily chores also because of this incident’, with another divulging that from their perspective, this pain ‘will affect you in so many aspects like there is no stopping point’, Participants even stated that this experience of pain affects their whole personality and relationship with self, with a participant sharing that they ‘tend to push myself away from me’. Quite a few interviewees felt a strain on their relationship with spirituality and God to the point that they were ‘at the verge of atheism’ because they rationalised that ‘if God is there, then why did this happen?’ with participants feeling betrayed by God and angry.

A significant number of participants felt their social life being hit the most by their experience of psychological pain, with people stating that they found themselves avoiding social situations with a participant saying that he would ‘purposely seek out situations where I don't need to be around people.’ Certain participants also stated that they were not able to focus on their academic obligations, such as exams and did not feel ‘interested in writing the exam’ and that they ‘started getting really bad grades because of the issue that was going on.’ A participant explained that they had difficulty studying as she was ‘feeling this intense confusion and these memories or thought the process, everything was rushing in me.’

Validation of pain

According to Leahy (2005), validation is the acknowledgment of a person's experience as one that is valid and deserving of attention. Participants in this study attested to the importance of validation of pain, to feel understood and accepted.

It was observed that participants who experienced psychological pain due to bereavement felt that their pain was validated by society and their loved ones. A participant shared that they felt very supported and understood, and that her friends said the ‘right things they’re supposed to say.’

However, those that faced psychological pain caused by an illness stated that while there were people who cared about their physical health, their mental health was often overlooked, or that they found themselves unable to speak about the psychological repercussions they were facing, with a participant divulging that she kept the ‘mental pressure’ she was going through at that time to herself. Another participant who faced psychological pain as a result of a friendship heartbreak felt invalidated even though she broke down crying, but was told that she should instead focus on her studies, and that this pain was not worth crying over.

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Another participant was told that she was making an unnecessary ‘big deal’ out of the situation when she was trying to cope with her friendship breakup. A participant mentioned that ‘you always seek for validation. You always seek for that acceptance,’ explaining that not receiving validation for psychological pain has a ‘huge impact.’

Positive factors

Though the people in the study were faced with extremely difficult situations, several of them mentioned that they did not want their pain to affect their *academic or career goals*. Some even said that because they were in pain, they did not want their pain to be an excuse for any missed work. A participant explained her rationale for trying harder to achieve better grades by telling herself, ‘Do better because you were the sick kid in class.’ Another participant who had just lost her grandmother during her board examination study leave, explained that while she felt incredibly confused and emotionally overwhelmed, ‘I don’t want people to blame my grandmother being a part of being a reason for my lower grades.’

For certain participants, during their time of emotional and mental trial, they found that turning to their *spiritual side* was a source of relief. A participant mentioned that she had socially isolated herself, but felt like she was ‘connecting more with my spiritual self.’ As she was feeling lonely, she said that ‘you need someone to talk to and God is always there.’

Though the participants described the deep and traumatic psychological pain they experienced, pain which still haunts them till today, almost half of them had a *positive outlook* on the pain, proclaiming that they still had hope that ‘time will heal’ or that they themselves will become a better, stronger, more empathetic persons who would like to help others. A participant shared that in life, there come ups and downs, but ‘you’ll start rising back up,’ and when one does, she shared that she hoped that they would be ‘more stronger, more emotionally mature, more better to deal with the situation.’ Another participant sent out a message for his future self, saying that through all the fear, the confusion and anguish he was currently experiencing, he hoped that ‘whatever you’re feeling at this point is used to make you a better person.’ Another participant said that a thought which helps him keep hope after losing a dear friend, was that the ‘purpose of life is to go on,’ expounding on that by saying that ‘important things that happen, that are yet to happen’. A participant shared that the excruciating loss of her friend taught her that to unabashedly go after her goals, ‘because life is actually short. And you don’t really know if you’re there tomorrow.’

CONCLUSION

The paper sought to understand if Indian young adults recognise psychological pain, and what their personal experience is regarding it, and if this pain of theirs has felt validated. All the participants of this research have stated that pain for them is both physical and psychological, with some even stating that psychological pain feels worse for them and is more impactful. The data suggested that psychological pain for the participants originated from losing a loved one, a strained or breakup in a social relationship (platonic or romantic) or from facing an illness.

These causes of psychological pain often make them experience variations in negative affect, such as feelings of loneliness, denial and emotional suppression, exhaustion and feeling emotionally drained, along with bursts of anger and frustration, sometimes even betrayal, they felt like they were being flooded by thoughts and faced anxiety. Participants even reported feeling low and a sense of guilt for being a burden on their caregivers and friends and family. Some even reported having suicidal thoughts. Participants even reported

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experiencing somatic symptoms., such as sleeplessness, headaches, lack of appetite and emotional pain that hurt physically.

The participants felt disadvantaged and divulged that their pain affected several parts of their life. Some participants stated that their pain affected their entire lives or their whole personality, while others stated that their relationship with themselves was affected. Several participants felt that their spiritual self was destroyed or that they were unable to concentrate on their academic pursuits. Several participants mentioned that their social life was greatly affected by this pain as they found themselves socially distancing from others.

Regardless of the pain and trauma being experienced by the participants, those near them often invalidated their pain and some participants weren't ready to share their grief as they feared that they wouldn't be understood or appreciated. However, those facing psychological pain caused by losing a loved one, felt supported and validated by their loved ones.

However, even though the pain and trauma experienced by the participants, they showed incredible bravery and resilience. They did not let their psychological pain affect their academics, or they worked even harder on their academic goals. If they faced self-isolation, they reached into themselves and tried to connect with their spiritual self. Some even had a positive outlook on this pain, they were hopeful that their pain would end, that they would be able to become better, stronger people who would be able to help others going through similar pain. They did not allow their psychological pain to overcome them, instead, many instead grew into empathetic, thoughtful human beings.

Implications

This paper has attempted to document that Indian young adults experience devastating psychological pain, which has left them unable to continue their daily life chores and has forced them to socially distance and isolate themselves. However, policy makers and academic institutions do not recognise mental health leaves as a valid reason for absence, while sick leaves for physiological illnesses are readily given out. However, mental health is as important as physical health, so this paper aims to be of use to Indian policy makers. This study will also have applicability in understanding and devising more personalised therapeutic interventions, psychological and social support plans for young adults facing psychological pain.

Limitations

The paper faced certain limitations:

- The sample size (N=23) was small.
- The sample of the study was limited to one institution.
- The study was not statistically representative.

Future suggestions

- This paper focused on the psychological pain experienced by the young adult population, further studies can delve into the experience of psychological pain in the Indian school and geriatric population, as well as the working population.
- Further studies can be conducted to understand the neural pathways underlying psychological pain as studies in this area are limited.

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Conflict of Interest

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