**Research Paper**

# Prevalence of Depression, Anxiety, and Stress among Higher Secondary Students in Paschim Medinipur

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**ABSTRACT**

Mental health issues encompass various conditions that influence a person's mood, thoughts, and behavior, including depression, anxiety, and stress. This study investigated the prevalence of depression, anxiety, and stress among higher secondary students, focusing on variables such as gender, social category, school location, and academic performance. A cross-sectional survey was conducted using a purposive sampling method, selecting 250 students from various Bengali-medium higher secondary schools in the Paschim Medinipur district. Data were collected using a bilingual version of the Depression, Anxiety, and Stress Scale (DASS-21), originally developed by Lovibond and Lovibond (1995). The findings revealed that female students exhibited slightly higher rates of mild and moderate depression compared to their male counterparts. Additionally, scheduled caste students showed the highest percentage of normal mental health levels, while scheduled tribe students demonstrated a greater prevalence of moderate depression. The study also indicated that urban students were more likely to experience mild depression, whereas rural students had higher rates of moderate depression. Furthermore, low academic achievers showed the highest levels of moderate depression, while moderate achievers displayed the lowest levels of depressive symptoms.

***Keywords:*** *Adolescent mental health, Educational disparities, Mental health disparities, Psychosocial factors, Socioeconomic status*

A dolescence is a transformative period marked by significant physical, psychological, emotional, and personality changes (Steinberg, 2021). This developmental stage often brings about stress, emotional instability, and behavioral challenges. For many adolescents, these changes can lead to mental health issues that interfere with their normal growth and daily activities (Patel et al., 2018). These challenges not only impact their academic performance but also increase their risk of substance abuse, violence, depression,

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anxiety, and even suicidal thoughts (World Health Organization [WHO], 2021). The World Health Organization estimates that mental and behavioral disorders account for about 12% of all diseases worldwide (WHO, 2021). Despite this significant statistic, mental health issues in India are frequently under-recognized and under-addressed (Saxena et al., 2017). Often, mental health concerns are only acknowledged when they escalate into serious issues requiring medical intervention (Kessler et al., 2007). Early identification and intervention are crucial for effective management and support (Patel et al., 2018).

Numerous studies have explored mental health issues across various sociocultural contexts in India. However, these findings are often not comprehensive enough to represent the entire nation (Verma & Giri, 2020). The nature of mental health problems can fluctuate over time, affecting planning, funding, and the provision of healthcare services. This variability underscores the need for ongoing research and tailored interventions to address mental health effectively (Patel et al., 2018).

In the school environment, students face a range of stressors including separation from family, demanding academic workloads, and sometimes ineffective or overwhelmed educational systems (Srinivas, 2019). These factors contribute to their overall stress levels. A mentally healthy student is typically characterized by their ability to engage in social interactions, maintain enthusiasm for learning, and pursue their future goals with motivation (WHO, 2021). Schools play a crucial role in providing a supportive environment where students can develop social skills and coping mechanisms for both social engagement and retreat (Saxena et al., 2017).

Depression is a common mental health disorder among adolescents. It is characterized by persistent sadness, hopelessness, and a lack of interest or pleasure in previously enjoyable activities (American Psychiatric Association, 2013). Depression can also lead to changes in appetite, sleep patterns, energy levels, and concentration. The impact on daily functioning can be severe, with symptoms such as fatigue and body aches often accompanying the emotional distress (Srinivas, 2019). Seeking support and treatment is essential for those experiencing symptoms of depression to manage their condition effectively (Kessler et al., 2007).

Anxiety is another prevalent issue, often triggered by stress or uncertain situations. While some level of anxiety is normal and can be motivating, excessive or chronic anxiety can become problematic. It may manifest as intense worry, fear, or physical symptoms like a racing heart, sweating, or restlessness (Steinberg, 2021). Managing anxiety typically involves techniques such as mindfulness, relaxation exercises, and professional support when necessary (Patel et al., 2018).

Stress is the body's response to demands or pressures, and while it can be motivating, excessive or prolonged stress can be detrimental. Symptoms of stress include physical signs like muscle tension, headaches, and sleep disturbances, as well as emotional indicators such as irritability and difficulty concentrating (Saxena et al., 2017). Effective stress management involves strategies such as relaxation techniques, time management, and seeking support when needed (Srinivas, 2019).

Overall, addressing mental health issues among adolescents requires a nuanced understanding of their challenges and proactive measures to provide support (Verma & Giri,

2020). Schools, families, and healthcare providers must work collaboratively to ensure that mental health concerns are recognized and managed appropriately, promoting better outcomes for young people during this crucial stage of development (Patel et al., 2018).

*Significance of the study*

Depression, anxiety, and stress are increasingly recognized as critical issues impacting secondary school students' well-being and academic success (Suldo et al., 2014; WHO, 2021). The pressures of school, social life, and personal development create an environment where these mental health concerns can deeply affect students (Steinberg, 2021). Understanding these issues is crucial for creating effective strategies to support students throughout their educational journey and beyond (Patel et al., 2018). When students experience depression, anxiety, and stress, their academic performance can suffer significantly (Srinivas, 2019). These conditions can lead to problems with concentration, focus, and memory (Kessler et al., 2007). Persistent stress might impair cognitive functions like problem-solving and critical thinking (Rogers & Tannock, 2018). As a result, students may struggle with completing assignments, participating in class, and performing well on exams, which can limit their future opportunities (Saxena et al., 2017). If left untreated, these mental health issues can have long-lasting effects (Patel et al., 2018). Adolescence is a critical period for brain development, and ongoing stress can disrupt this process, potentially leading to more severe mental health problems in adulthood (Steinberg, 2021). Moreover, unresolved issues can create a cycle of negative self-esteem, social isolation, and feelings of inadequacy that can continue into later life (Verma & Giri, 2020).

Secondary and higher secondary school years are a critical period when students are shaping their identities and building social relationships. Mental health challenges can hinder their ability to build and maintain healthy relationships (Patel et al., 2018). Anxiety may lead to social withdrawal, while depression can make it difficult to engage with peers, resulting in loneliness and further exacerbation of mental health issues (Suldo et al., 2014). The connection between mind and body is strong, and mental health issues often manifest as physical symptoms (Srinivas, 2019). Chronic stress, anxiety, and depression can cause sleep disturbances, headaches, digestive problems, and weakened immune systems (Kessler et al., 2007). This creates a cycle where poor physical health can worsen mental health, and vice versa (WHO, 2021). Educators have a unique opportunity to teach students valuable life skills for managing stress and mental health (Rogers & Tannock, 2018). By introducing strategies like mindfulness, time management, and healthy communication, educators can help students build resilience and navigate the challenges they face (Patel et al., 2018). Recognizing the importance of mental health in education promotes a more holistic approach to learning, ensuring that students are supported emotionally and mentally (Suldo et al., 2014). This comprehensive approach not only enhances academic performance but also contributes to students' overall well-being and personal growth (WHO, 2021). Recognizing the importance of this research area, researchers have conducted numerous literature reviews and identified a gap, noting that no specific studies have been conducted involving higher secondary students in the Paschim Medinipur district.

*Delimitations of the Study*

The present study delimited to the following: -
- The present study delimited to 250 samples from both rural and urban areas of Paschim Medinipur District.
- Students studying in class 11<sup>th</sup> and 12<sup>th</sup> were selected.

- The study sample was collected from 10 (Ten) Bengali medium higher secondary schools of Paschim Medinipur district only.

## *Objective of the Study*
In view of the basic research questions and delimitation of the study, the following objectives were identified as -

- To investigate the present status of Depression, Anxiety and Stress among the students of Higher Secondary Level.
- To find out the rate of prevalence of depression, anxiety and stress among the students of higher secondary level with respect to their Gender, Social category, Locality of the Institute, Academic Achievement.

## *Hypotheses of the Study*
In view of the basic research question and objectives of the study the following null hypothesis were formulated: -

- **$H_01$:** Gender has no significant variation in Depression, Anxiety and Stress among the students at higher secondary level.
- **$H_02$:** Social category has no significant variation in Depression, Anxiety and Stress among the students at higher secondary level.
- **$H_03$**: Locality of institute has no significant variation in Depression, Anxiety and Stress among the students at higher secondary level.
- **$H_04$**: Academic achievement has no significant variation in Depression, Anxiety and Stress among the students at higher secondary level.

## *Study Design*
To fulfill the purpose of the study, researchers were implemented a cross-sectional survey framework with the help of purposive sampling technique. Entire higher secondary level school students from Paschim Medinipur district were considered as the population of the study, whereas 250 sampling units were selected from the different higher secondary Bengali medium schools of Paschim Medinipur district were identified as sample of the study. Depression, Anxiety and Stress recognized as dependent variable in the study and to investigate the variations of different independent factors were pointed out as Gender, Social category, Locality of the Institute, Academic Achievement on them. Bilingual version of Depression, Anxiety, Stress Scale (Dass-21) used to collect data, the original English version was developed by Lovibond & Lovibond in 1995. Reliability and validity of the modified questionnaire were checked and assured by the researchers before implementation.

## *Descriptive Statistics*
Descriptive statistics is presented to show the levels of Depression among higher secondary students at Paschim Medinipur District.

*Table 1: Showing percentage in levels of depression concerning independent factors.*

| | | Level of Depression | | |
|---|---|---|---|---|
| | | **Normal** | **Mild** | **Moderate** |
| **Gender** | Male | 67% | 22.3% | 10.6% |
| | Female | 67.9% | 15.4% | 16.7% |
| **Social category** | General | 69.0% | 20.4% | 10.6% |
| | Scheduled Caste | 90.9% | 9.1% | 0.0% |
| | Scheduled Tribe | 45.5% | 18.2% | 36.4% |
| | Other Backward Class | | | |
| **Locality of Institution** | Rural | 66.1% | 15.5% | 18.4% |
| | Urban | 71.1% | 23.7% | 5.3% |
| **Academic Achievement** | Low Achievers | 43.2% | 10.8% | 45.9% |
| | Moderate Achievers | 78.4% | 15.3% | 6.3% |
| | High Achievers | 64.7% | 23.5% | 11.8% |

Table 1 illustrated how depression levels vary across gender, social category, locality, and academic achievement. Among males, 67% have normal levels of depression, 22.3% show mild depression, and 10.6% experience moderate depression. In comparison, females have a similar percentage in the normal range (67.9%), but slightly higher rates of mild (15.4%) and moderate depression (16.7%). Social category-wise, Scheduled Caste students have the highest percentage in the normal range (90.9%), while Scheduled Tribe students show a significant portion with moderate depression (36.4%). Students from rural areas experience more moderate depression (18.4%) than their urban counterparts (5.3%), who are more likely to have mild depression (23.7%). Low achievers show the highest rate of moderate depression (45.9%), whereas moderate achievers report the lowest depression levels, with 78.4% in the normal range.

*Table 2: Showing percentage in levels of anxiety concerning independent factors.*

| | | Level of Anxiety | | | | |
|---|---|---|---|---|---|---|
| | | **Normal** | **Mild** | **Moderate** | **Severe** | **Ex Severe** |
| **Gender** | Male | 69.10% | 12.80% | 11.70% | 4.30% | 2.10% |
| | Female | 57.70% | 11.5% | 22.40% | 7.70% | 0.60% |
| **Social category** | General | 74.30% | 14.20% | 8.0% | 3.50% | 0.0% |
| | Scheduled Caste | 86.40% | 4.50% | 0.0% | 6.80% | 2.30% |
| | Scheduled Tribe | 45.5% | 9.20% | 31.80% | 4.50% | 9.10% |
| | Other Backward Class | 32.40% | 14.10% | 42.30% | 11.30% | 0.0% |
| **Locality of Institution** | Rural | 60.30%% | 9.20% | 23.30% | 6.30% | 1.10% |
| | Urban | 65.80% | 18.40% | 7.90% | 6.60% | 1.30% |
| **Academic Achievement** | Low Achievers | 27.0% | 10.80% | 40.50% | 21.60% | 0.0% |
| | Moderate Achievers | 74.80% | 7.20% | 11.70% | 4.50% | 1.80% |
| | High Achievers | 60.80% | 17.60% | 17.60% | 2.90% | 1.0% |

Table 2 revealed how anxiety levels vary across gender, social category, locality, and academic achievement. Males show higher normal anxiety levels (69.1%) compared to females (57.7%), but females have more moderate (22.4%) and severe anxiety (7.7%). Among Social categories, the General category has the highest normal anxiety (74.3%), while Other Backward Class students have elevated moderate anxiety (42.3%). SC individuals largely experience normal anxiety (86.4%), whereas Scheduled Tribe students show higher rates of moderate (31.8%) and extreme anxiety (9.1%). Urban students display more mild anxiety (18.4%), but rural students have higher moderate anxiety (23.3%). Low achievers report the most moderate (40.5%) and severe anxiety (21.6%), while moderate achievers show the least anxiety (74.8% normal). High achievers tend to fall in the normal range (60.8%) but also experience higher levels of mild (17.6%) and moderate anxiety (17.6%).

*Table 3: Showing percentage in levels of stress concerning independent factors.*

| | | Level of Stress | | |
|---|---|---|---|---|
| | | **Normal** | **Mild** | **Moderate** |
| **Gender** | Male | 67% | 22.3% | 10.6% |
| | Female | 67.9% | 15.4% | 16.7% |
| **Social category** | General | 69.0% | 20.4% | 10.6% |
| | Scheduled Caste | 90.9% | 9.1% | 0.0% |
| | Scheduled Tribe | 45.5% | 18.2% | 36.4% |
| | Other Backward Class | | | |
| **Locality of Institution** | Rural | 66.1% | 15.5% | 18.4% |
| | Urban | 71.1% | 23.7% | 5.3% |
| **Academic Achievement** | Low Achievers | 43.2% | 10.8% | 45.9% |
| | Moderate Achievers | 78.4% | 15.3% | 6.3% |
| | High Achievers | 64.7% | 23.5% | 11.8% |

Table 3 outlined how stress levels (Normal, Mild, Moderate) vary across gender, social category, locality, and academic achievement. Males and females show similar levels of normal stress (67% and 67.9%, respectively), but females exhibit higher rates of moderate stress (16.7%) compared to males (10.6%). Among Social categories, the General category shows 69% with normal stress, while Scheduled Caste students report the highest normal stress (90.9%) and no moderate stress. In contrast, Scheduled Tribe students have the highest rate of moderate stress (36.4%). No data is provided for Other Backward Classes. Regarding locality, urban students show more normal stress (71.1%) and less moderate stress (5.3%) compared to rural students, who have 18.4% moderate stress. Stress levels also correlate with academic achievement: low achievers experience the most moderate stress (45.9%), while moderate achievers have the least (6.3%) and the highest percentage in the normal range (78.4%). High achievers fall mostly in the normal range (64.7%) but also show higher rates of mild (23.5%) and moderate stress (11.8%).

**Hypothesis testing**

*Table 4: Showing inferential statistics based on hypotheses.*

| VARIABLE | | DEPRESSION | ANXIETY | STRESS |
|---|---|---|---|---|
| **GENDER** | $\chi^2$ | 3.064 | 7.151 | 2.135 |
| | df | 2 | 4 | 2 |
| | Asymp. sig. | 0.216 | 0.128 | 0.344 |
| | Remarks | NS(p>0.05) | NS(p>0.05) | NS(p>0.05) |
| **SOCIAL CATEGORY** | $\chi^2$ | 26.682 | 78.024 | 10.712 |
| | df | 6 | 12 | 6 |
| | Asymp. sig. | 0.000 | 0.000 | 0.098 |
| | Remarks | S(p<0.05 ) | S(p<0.05 ) | NS(p>0.05) |
| **LOCALITY OF THE INSTITUTION** | $\chi^2$ | 8.483 | 10.572 | 4.008 |
| | df | 2 | 4 | 2 |
| | Asymp. sig. | 0.014 | 0.032 | 0.135 |
| | Remarks | S(p<0.05) | S(p<0.05) | NS(p>0.05) |
| **ACADEMIC ACHIEVEMENT** | $\chi^2$ | 39.632 | 44.456 | 21.311 |
| | df | 4 | 8 | 4 |
| | Asymp. sig. | 0.000 | 0.000 | 0.000 |
| | Remarks | S(p<0.05 ) | S(p<0.05 ) | S(p<0.05 ) |

**S- Significant; NS-Not Significant**

The chi-square analysis reveals the following insights: For gender, there are no significant differences in depression ($\chi^2$ = 3.064, p = 0.216), anxiety ($\chi^2$ = 7.151, p = 0.128), or stress ($\chi^2$ = 2.135, p = 0.344). In contrast, social category shows significant differences in depression ($\chi^2$ = 26.682, p = 0.000) and anxiety ($\chi^2$ = 78.024, p = 0.000), but not in stress ($\chi^2$ = 10.712, p = 0.098). Locality of the institution also demonstrates significant differences in depression ($\chi^2$ = 8.483, p = 0.014) and anxiety ($\chi^2$ = 10.572, p = 0.032), though stress shows no significant difference ($\chi^2$ = 4.008, p = 0.135). Lastly, academic achievement is significantly associated with differences in depression ($\chi^2$ = 39.632, p = 0.000), anxiety ($\chi^2$ = 44.456, p = 0.000), and stress ($\chi^2$ = 21.311, p = 0.000).

Therefore,
- $H_01$: Gender has no significant variation in Depression, Anxiety and Stress among the students at higher secondary level – *is failed to reject in all cases.*
- $H_02$: Social category has no significant variation in Depression, Anxiety and Stress among the students at higher secondary level – *is failed to reject in stress but rejected in the cases of depression and anxiety.*
- $H_03$: Locality of institute has no significant variation in Depression, Anxiety and Stress among the students at higher secondary level -– *is failed to reject in stress but rejected in the cases of depression and anxiety.*
- $H_04$: Academic achievement has no significant variation in Depression, Anxiety and Stress among the students at higher secondary level - *is rejected in all cases.*

*Major Findings*
- Female students have slightly higher rates of mild and moderate depression compared to males.
- Scheduled caste students show the highest percentage of normal levels, whereas scheduled tribe students show a higher prevalence of moderate depression.

- Urban students tend to experience less moderate depression but more mild depression than rural students.
- Low achievers show the highest percentage of moderate depression, while moderate achievers have the lowest.

## DISCUSSION

The primary objective of this study was to determine the prevalence of depression, anxiety, and stress among higher secondary students, considering factors such as gender, social category, the location of the institution, and academic performance. The findings indicated that female students exhibited slightly higher rates of mild to moderate depression compared to their male counterparts. Research consistently indicates that female students are more likely to experience mild to moderate depression than their male peers. For example, Nolen-Hoeksema (2001) highlights that adolescent girls tend to face higher levels of depression, which may be linked to greater exposure to stress and a tendency to overthink or ruminate on problems. Similarly, Salk et al. (2017) found that females are at a significantly higher risk of developing depression during their teenage years, a pattern that often continues into adulthood. Piccinelli and Wilkinson (2000) also observed that depression is roughly twice as prevalent among women as men, starting in adolescence, likely due to a combination of biological, psychological, and social influences. Another finding revealed that Scheduled caste students show the highest percentage of normal levels, whereas scheduled tribe students show a higher prevalence of moderate depression. Research has consistently shown similar trends in the prevalence of depression among various social groups. For example, Desai et al. (2018) found that students from scheduled castes (SC) generally experience fewer symptoms of depression, while those from scheduled tribes (ST) are more likely to suffer from moderate to severe depression. Kumar et al. (2019) further highlighted that ST students are particularly vulnerable to higher rates of depression, likely due to factors such as marginalization and limited access to necessary resources, which worsen their mental health struggles. Likewise, Patra and Kumar (2017) observed that SC students tend to have better mental health outcomes than their ST counterparts, who often face heightened stress and depression, especially in rural and underprivileged areas. Current study also found that urban students tend to experience less moderate depression but more mild depression than rural students. Research consistently showed that urban students tend to experience lower rates of moderate depression but are more likely to report mild depressive symptoms compared to their rural counterparts. For instance, Reddy et al. (2018) found that urban students are more prone to mild depression, which may be attributed to factors such as greater academic pressure and feelings of social isolation. On the other hand, rural students are more likely to suffer from moderate to severe depression, likely due to challenges such as limited access to mental health services and increased socio-economic stress. Similarly, Singh et al. (2019) noted that rural students often face significant hardships, including financial difficulties and fewer educational opportunities, which contribute to higher levels of moderate depression. In contrast, Das and Biswas (2017) observed that while urban students may experience less moderate depression, they are more likely to encounter mild depressive symptoms, possibly due to the pressures of living in a fast-paced, competitive urban environment. Finally, present study showed that low achievers showed the highest percentage of moderate depression, while moderate achievers have the lowest. Researches showed that low academic achievers are more likely to experience moderate levels of depression compared to their peers with moderate or high achievement. For instance, Hisham et al. (2016) found that students with lower grades often struggle with feelings of inadequacy, failure, and the pressure to improve, which can contribute to moderate

depression. Similarly, Karaman et al. (2018) discovered that students with moderate academic performance typically show the lowest levels of depression, likely because they face less intense pressure than both high achievers, who are striving to maintain their status, and low achievers, who may feel overwhelmed by their struggles. Supporting this, Kim and Kim (2017) found that low achievers are more prone to moderate depression, likely due to academic stress and a lack of self-confidence, while moderate achievers tend to enjoy better mental health
.

### *Educational Implications*
The study highlighted several critical findings with significant implications for the education system, mental health services, and broader societal approaches to student well-being.

The government should implement gender-sensitive mental health programs that offer support groups, counseling, and workshops focused on building emotional resilience. These initiatives can help address the unique challenges faced by students of different genders. Additionally, mental health awareness campaigns should encourage both male and female students to seek help without fear of stigma, fostering an environment of emotional openness and support for everyone.

The government should introduce culturally tailored mental health support for Scheduled Tribe (ST) students, focusing on addressing their unique challenges and socio-economic stressors. By implementing programs that are sensitive to their cultural backgrounds, the government can provide more effective support that meets the specific mental health needs of ST students.

Rural schools should work on improving access to mental health resources, ensuring that students in these areas receive the support they need. In urban schools, the focus should be on helping students manage stress caused by academic competition and feelings of social isolation, providing them with the necessary tools to cope with these challenges.

The study suggesting a clear need for academic support systems, such as tutoring, paired with emotional support to help students build self-esteem and resilience. Mental health initiatives should focus on fostering holistic development, ensuring that students' growth goes beyond just academic achievement and includes their overall well-being.

### CONCLUSION
Mental health issues encompass various conditions that influence a person's mood, thoughts, and behavior, including depression, anxiety, and stress. These challenges can significantly affect daily life, relationships, and overall well-being. Providing early intervention and support is crucial for effectively managing and improving mental health. The study tried to figure out the prevalence rate of depression, anxiety and stress among the students of higher secondary level with respect to their Gender, Social category, Locality of the Institute, Academic Achievement and appeared with some significant findings. The study also put forward several recommendations aimed at improving the education system, mental health services, and broader societal approaches to supporting student well-being. While the study provides valuable insights, the researchers acknowledge that there are several limitations and recognize that there is still room for further exploration and deeper investigation into the topic.

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