

Exploring the Anxiety, Depression and Stress in Family Relation of Young Adults

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ABSTRACT

This study investigates the influence of family relationships on the mental well-being of young adults, focusing on anxiety, depression, and stress, with a specific examination of gender differences. The sample comprises 100 female and 100 male young adults. The research aims to address four hypotheses regarding gender differences in anxiety, depression, stress, and their overall levels among young adults.

Keywords: *Depression, Anxiety, Stress*

What is Depression?

Depression is a mental disorder that can cause feelings of sadness, hopelessness, and loss of interest in any activities. It can also affect on how do you think, sleep, eat and work.

The symptoms of Depression are

- Feeling sad, irritable, empty, or hopeless
- Losing interest in the activities you once enjoyed
- Significant changes in appetite and/or weight.
- Sleeping too little or too much
- Difficulty thinking or concentrating.

What are the causes for Depression?

- It can be genetic Factors
- It can be chemical imbalances in the brain
- Stressful life events such as the death of the loved one, trauma, divorce, isolation, and lack of support.
- Chronic pain and chronic conditions like diabetes.

What are the treatments?

Antidepressant medications, Psychological therapy, psychological therapy and psychiatric somatic therapies

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What are the Coping Strategies?

- Staying in touch with people
- Being more active
- Facing your fears
- Not drinking too much
- Having a healthy diet
- Having a daily life routine.

What is Anxiety?

Anxiety is a normal reaction to stress. Mild levels of anxiety can be beneficial in some situations. It can alert us to dangers and help us prepare and pay attention. Anxiety disorders differ from normal feelings of nervousness or anxiousness and involve excessive fear or anxiety. Anxiety disorders are the most common mental disorders. They affect nearly 30% of adults at some point in their lives. However, anxiety disorders are treatable with several psychotherapeutic treatments. Treatment helps most people lead normal productive lives.

Anxiety refers to anticipation of a future concern and is more associated with muscle tension and avoidance behavior.

Fear is an emotional response to an immediate threat and is more associated with a fight or flight reaction – either staying to fight or leaving to escape danger.

Anxiety disorders can cause people to try to avoid situations that trigger or worsen their symptoms. Job performance, schoolwork and personal relationships can be affected. In general, for a person to be diagnosed with an anxiety disorder, fear or anxiety must:

- Be out of proportion to the situation or be age-inappropriate
- Hinder their ability to function normally

There are several types of anxiety disorders: generalized anxiety disorder, panic disorder with or without agoraphobia, specific phobias, agoraphobia, social anxiety disorder, separation anxiety disorder and selective mutism.

Types of Anxiety Disorders

- Generalized Anxiety Disorder
- Panic Disorder
- Phobias
- Social Anxiety Disorder
- Separation Anxiety Disorder

1) Generalized Anxiety Disorder

Generalized anxiety disorder involves persistent and excessive worry that interferes with daily activities. This ongoing worry and tension may be accompanied by physical symptoms, such as restlessness, feeling on edge or easily fatigued, difficulty concentrating, muscle tension or problems sleeping. Often the worries focus on everyday things such as job responsibilities, family health or minor matters such chores, car repairs, or appointments.

2) Panic Disorder

Panic Disorder is a type of anxiety disorder that is characterized by intense, recurrent, and unexpected panic attacks. Fear and anxiety can be normal to specific situations and stressful events. Panic disorder differs from this normal fear and anxiety because it is often extreme, and may seem to strike out of the blue.

Some Symptoms of panic disorder

- Chest Pain
- Dizziness
- Feelings of extreme terror that occur suddenly without warning
- Numbness in the hands and feet
- Pounding heart
- Rapid heart
- Sweating
- Trembling
- Weaknesses

The causes of panic disorders are not clearly understood by any mental health experts believe that a combination of environmental, biological and psychological factors

- Age
- Gender
- Trauma
- Life Transitions

3) Phobias

According to the American Psychiatric Association, a phobia is an irrational and excessive fear of an object or situation. In most cases, the phobia involves a sense of endangerment or a fear of harm. For example, those with agoraphobia fear being trapped in an inescapable place or situation.

Some Symptoms of phobias are:

- Breathlessness
- Dizziness, trembling, and increased heart rate
- Fear of dying
- Nausea
- Preoccupation with the feared object
- A sense of unreality

4) Social Anxiety Disorder

Social Anxiety Disorder is an Anxiety disorder that causes intense fear of social situations. It is also known as social phobia.

The symptoms of this disorder is

- Fear of being judged or embarrassed in social situations
- Blushing, trembling, sweating, chest pain, rapid heart beat
- Worrying about the social situation before it happens.

The treatment for this is

- Cognitive Behavioral Therapy (CBT)
- Medication are also there like SSRIs, SNRIs, and MAOIs
Selective serotonin reuptake inhibitors (SSRIs)
Serotonin nonreuptake inhibitors (SNRIs)
Monoamine oxidase inhibitors (MAOIs)

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SSRIs, SNRIs, and MAOIs all these classes of antidepressants that affect the balances of serotonin and nor epinephrine in the brain.

SEPARATION ANXIETY DISORDER

Separation anxiety disorder is an anxiety disorder that causes fear of being separated from loved ones.

The Symptoms of the Separation anxiety disorder are:

- Intense fear or worry
- Refusing to go to school
- Nightmares about separation
- Headaches, stomachaches, or other physical complaints

The treatment for Symptoms of the Separation

- Therapy like Cognitive Behavioral Therapy (CBT), Parent Child interaction therapy, and bravery directed interaction (BDI).
- Medication
- Family therapy
- School input

STRESS

What is stress?

Stress is a natural responses to challenge and threats that can affect both your mind and body. It can be caused by a number of life events, including starting a new job, moving or death of a loved one.

The Symptoms of Stress are

- Feeling anxious, irritable or moody
- Headaches, muscle aches, or pains
- Upset stomach or trouble sleeping
- Change in appetite
- Sweating

There are different types of Stress are

- Acute Stress
- Chronic Stress
- Episodic acute stress
- Eustress

ACUTE STRESS

- Short-term stress that occurs in response to immediate challenges
- It can be positive or negative
- Can you help you focus and take action

CHRONIC STRESS

- Long-term stress that can last for week or months
- Can be caused by financial problems, relationship issues, or work troubles
- Can lead to serious health issues if left unmanaged

EPISODIC ACUTE STRESS

- Experiencing acute stress on a regular basis
- Can affect people in certain professions, like healthcare providers

EUSTRESS

- It was also known as positive stress
- Can act as a motivator to take on challenges
- Can lead to personal growth and resilience

COPING WITH STRESS

How do we cope from stress

- Learning how to cope with stress can help you
- Getting active
- Eating a unhealthy diet
- Avoiding unhealthy habits
- Meditating
- Laughing more
- Connecting with others
- Trying yoga

Rationale of the study

The rationale of the study is to understand how Anxiety, Depression, Stress affect the family and how our relationship gets affected by young adults. Family relations during this phase play a major role in shaping emotional wellbeing of the young adult. There are a lot of challenges faced such as strained communication, generational conflicts, or unmet expectations within their families, which can make you understand anxiety, depression, and stress. Despite the growing prevalence of mental health issues in this area, there is limited research exploring the interplay between family dynamics and psychological distress in young adults.

REVIEW OF LITERATURE

Linden & Stuart (2020) This research aimed in assessing the impact of post-secondary and mental wellbeing. They conducted a scoping review of the academic literature of Canadian students. Major findings include student stress, resilience through effective coping and help-seeking, and programs or strategies to improve campus mental health. Suggestion includes a call for increased mental health promotion and mental illness prevention activities that are sensitive to different cultures, religions, ethnicities, gender and sexualities.

Morr & Yuan (2020) This study aimed to understand how students received support to maintain their mental wellbeing while facing their evil life events during this period of emerging adulthood. It aimed to provide design requirements for house social and technical system should support their students for maintaining their mental wellbeing. The method they used was semi structured interviews of 19 undergraduate and graduate students. Result identified 3 needs first it is necessary to understand the level of need and should be assured that level of assistance is given second must continuously rebuild real relationship with support givers 3rd negotiate tensions between the need to disclose and the stigma associated with disclosure. From this study we got to know how we should improve our technology that can help invent the wellbeing of students.

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Hernandez et.al, (2020) This paper assessed the Mental Health and Well-Being of University Students. 5561 journal articles were extracted. Findings of the study of the research on mental health and well-being in university students: (a) has experienced a steady growth over the last decades, especially since 2010 (b) is disseminated in a wide range of journals, mainly in the fields of psychology, psychiatry, and education research; (c) is published by scholars with diverse geographical background, although more than half of the publications are produced in the United States of America (d) lies on a fragmented research community composed by multiple research groups with little interactions between them; (e) is relatively interdisciplinary and emerges from the convergence of research conducted in the behavioral and biomedical sciences; (f) tends to emphasize pathogenic approaches to mental illness.

Lyons, Wilcox, Dearsley (2020)- The aim of this research was to see the impact of COVID-19 on medical students and how they manage their activities to cope up with the situation. Cross sectional survey was designed, and the Kessler psychological distress scale was used. The results showed 219 students participated where the impact of COVID-19 on mental wellbeing has led to legitimate concerns by students regarding their studies and progress through course.

Baik et.al, (2019) - The growing speed of mental illness in students in universities or intermediate students cause is a lot of difficulties to the education department, yet teachers know little about what are the stressors at student point/ end in universities and how can universities help them. This article collected 2776 students reviews to questions, answers received were majorly for 5 areas to be considered Academic teachers and teaching practices; environment, culture and communication; course design; program administration and assessment; student services and support; and student society activities. This revealed how teachers and administration can work upon these factors in order to improve the wellbeing of students.

Harding et.al., (2019)- There are numerous factors that impact students and teachers' mental wellbeing in a school environment. This research aimed to see whether a teacher's mental well-being impacts the well-being of its students. Cross sectional data were collected from 3216 students and 1182 teachers. It was done by WEMWBS scale of mental wellbeing and teacher depression by patient health questionnaire. The result obtained was that a teacher's mental wellbeing impacts the well-being of its students.

Singh (2018)- This research aimed to check the connection between family environment and mental state of adolescents. Family environment scale and mental health check list were used as tools to check on 168 adolescents by random sampling technique. The result showed that family environment impacts well-being and suggested some appropriate measures to strengthen the connection of family atmosphere with mental state of adolescents.

A. Thomas et.al., (2017) -There are many factors in a family that affects the wellbeing like marital, sibling, gender difference. The result of this research stated that family members are significant for the wellbeing of each and every individual in the family, relationships are important for wellbeing as individuals.

McCormick et.al., (2017) This research aims to see the impact of Green Space Impact on the Mental Well-being of Children. 341 articles were studied, and 12 articles were reviewed in the final analysis that yield that access to green space was associated with improved mental-wellbeing, overall health and cognitive development of children. Also improves memory,

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competence, reduces stress. Also improves the behaviors and symptoms of ADHD and was even associated with higher standardized test scores.

Godwin et.al. (2016)- The aim of this study was to examine the help-seeking intentions of university students in terms of their mental-wellbeing and to see their views on formal and informal help-seeking nature. 220 students were taken and filled an online questionnaire. Every third student had a professional help for wellbeing whereas informal help was more useful than formal help, also result showed that informal help gave better mental wellbeing than formal one.

V. Porche et.al., (2016)- Exposure to adversity in childhood like domestic violence, mental issue loss and poverty can cause long term mental health problems and can damage mental wellbeing. The study involved 65,680 kids between the ages of 6 and 17 and found that family adversity is mediated by children's mental health status. The findings indicated that students who exhibit internalizing and externalizing symptoms should have their mental health screened more thoroughly.

Research Gaps

- Population-Specific Gaps
This was basically focusing on the young adults as a distinct group.
- Relational Gaps
As there are a lot of specific family relationships, for example extended family or sibling dynamics there are a lot of comparisons that happen between them because they think they influence each other by this.
- Contextual Gaps
There under representation of the cultural diversity and modern societal influences affect the relationship between the family and young adults.

METHODOLOGY

Aim- To study the family relationship and mental well-being of adolescents.

Objectives

- To study the gender differences on anxiety among male and female young adults.
- To measure the gender differences on depression among male and female young adults.
- To study the gender differences on stress among male and female young adults
- To study the relationship on the level of anxiety, depression and stress among young adults.

Hypotheses

- H1- There will be significant gender differences in anxiety among young adults.
- H2- There will be significant gender differences in depression among young adults.
- H3- There will be significant gender differences in stress among young adults.
- H4- There will be significant gender differences in the level of Anxiety, Depression, Stress among young adults.

Sample

200 Young Adults (100 FEMALE & 100 MALE).

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Sampling Techniques

Convenience sampling techniques

Research Design

Experimental Research

Variables-

- DEPRESSION
- ANXIETY
- STRESS

Tools Used-

S. No.	Name of the tool	Author	Year	Reliability	Validity
1.	DASS (Depression, Anxiety, Stress)	Lovibond and Lovibond	1995	0.74	

Measures

This test measure anxiety, Stress and Depression
STATISTICAL ANALYSIS

DESCRIPTIVE STATISTICS (Mean, Standard Deviation)

PEARSON CORRELATION

t- TEST

RESULT

Table 1: Gender comparison of Stress in young adults

Variable	Gender	N	Mean	S.D	t-value	p-value
Stress	Male	100	8.54	4.57	2.62	Sig**
	Female	100	8.38	4.72		

*Significant at 0.01** and 0.05**

In the above data table, the mean stress score for Male young adults is 8.54, whereas for Female young adults, it slightly decreases to 8.38. A t-test analysis yielded a value of 2.62 for stress, demonstrating statistical significance at both the 0.01 and 0.05 levels. These results indicate a significant disparity in stress levels between male and female young adults.

Table 2: Gender comparison of Anxiety in young adults

Variable	Gender	N	Mean	S.D	t-value	p-value
Anxiety	Male	100	8.57		2.63	Sig**
	Female	100	8.27			

*Significant at 0.01** and 0.05**

In the above data table, the mean stress score for Male young adults is 8.57, whereas for Female young adults, it slightly decreases to 8.27. A t-test analysis yielded a value of 2.63 for anxiety, demonstrating statistical significance at both the 0.01 and 0.05 levels. These results indicate a significant disparity in stress levels between male and female young adults.

Table 3: Gender comparison of Depression in young adults

Variable	Gender	N	Mean	S.D	t-value	p-value
Depression	Male	100	8.54	4.90	2.61	Sig**
	Female	100	7.51	5.16		

*Significant at 0.01** and 0.05**

In the above data table, the mean stress score for Male young adults is 8.54, whereas for Female young adults, it slightly decreases to 7.51. A t-Test analysis yielded a value of 2.61 for depression, demonstrating statistical significance at both the 0.01 and 0.05 levels. These results indicate a significant disparity in depression levels between male and female young adults.

Table 4: Relationship between Stress and anxiety among college going students

Variable	Mean	S.D	r value	p-value
Stress	16.81	4.59	.267	Sig**
Anxiety	15.91	5.04		

Significant at both 0.01 and 0.05 level.

Table shows the Correlation value between stress and anxiety (0.267) which is significant at 0.01 and 0.05 levels. It can be observed that there is significant relationship between stress and anxiety. It can also be seen that the scores of stress increased with increase in anxiety scores among young adults.

Table 5: Relationship between anxiety and depression among young adults

Variable	Mean	S.D	r value	p-value
Anxiety	15.91	4.59	.284	Sig**
Depression	16.92	5.04		

Significant at both 0.01 and 0.05 level.

Table shows the Correlation value between anxiety and depression (0.284) which is significant at 0.01 and 0.05 levels. It can be observed that there is significant relationship between anxiety and depression. It can also be seen that the scores of anxiety increased with increase in depression scores among young adults.

Table 6: Relationship between depression and stress among young adults

Variable	Mean	S.D	r value	p-value
Depression	16.92	4.63	0.272	Sig**
Stress	16.81	4.59		

Significant at both 0.01 and 0.05 levels.

Table shows the Correlation value between depression and stress (0.272) which is significant at 0.01 and 0.05 levels. It can be observed that there is a significant relationship between depression and stress. It can also be seen that the scores of depressions increased with an increase in stress scores among young adults.

DISCUSSIONS

The aim of the study is to investigate the impact of family relationships on the mental well-being of adolescents. The study investigated anxiety, depression, and stress levels between males and females.

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In the above data table 1, the mean stress score for Male young adults is 8.54, whereas for Female young adults, it slightly decreases to 8.38. A t-test analysis yielded a value of 2.62 for stress, demonstrating statistical significance at both the 0.01 and 0.05 levels. These results indicate a significant disparity in stress levels between male and female young adults. This research delves into how stress, chronic illnesses, and having multiple chronic conditions (multimorbidity) affect older adults (over 50) in low- and middle-income countries. Analyzing data from a large WHO study, researchers found a surprisingly high number of participants had multiple chronic illnesses. Additionally, there was a worrying trend - the more chronic conditions someone had, the higher their stress levels. Interestingly, weight and blood pressure didn't seem to directly impact stress levels in these countries.

Studies on weight and stress show mixed results. Some research suggests men with lower body mass index (BMI) experience less stress, while others find a connection between stress and weight for both genders, and specifically for women. A recent study by Costa et al. (2021) adds another layer of complexity. They found that overweight women reported more stress than average, but this wasn't true for obese women. This suggests the stress-eating relationship is intricate. Food might be a coping mechanism for some, potentially explaining lower stress levels. Overall, this research highlights the strong link between multiple chronic illnesses and stress in older adults from low- and middle-income countries. The role of weight in stress perception remains unclear, and further studies are needed to explore the influence of gender and coping mechanisms.

In table-2 a tabulated mean value of male young adults for depression is 8.54, whereas for female young adults, it is 7.51. This discovery suggests a significant disparity, whereby men participants have greater depression levels in comparison to their female counterparts. At both 0.01 and 0.05 levels, the calculated t-test statistic for depression, which measures at 2.63, exhibits statistical significance. These statistical results clearly highlight a significant disparity in depression levels between young individuals who identify as male and female. This scientific passage explores the psychological strain men experience due to societal expectations of masculinity (Pleck, 1983). This strain, termed "gender role strain," arises from the perceived gap between a man's actual experiences and the prescribed behaviors associated with being masculine (Courtenay, 2000). Traditional masculine ideals often emphasize emotional control and dominance, potentially leading to internal conflict and anxiety (e.g., Courtenay, 2000).

The research suggests that men struggling with gender role strain may have difficulty utilizing healthy coping mechanisms for their emotions (Burda et al., 1984; Butler et al., 1985). Additionally, the social stigma surrounding male emotional expression may limit their access to supportive social circles (Matud, 2004). Seeking professional help for mental health concerns remains a significant challenge for many men. Studies indicate a reluctance to seek help, even from friends, and an even stronger aversion to seeking therapy for depression (Weissman & Klerman, 1977; Padesky & Hammen, 1981; Seidler et al., 2016; Staiger et al., 2020; Mahalik & Di Bianca, 2021). These observations align with the traditionally masculine values of self-reliance and stoicism, which can clash with the perceived vulnerability of seeking help (Pleck, 1983; Good et al., 1989).

The characteristics often associated with a masculine identity, such as dominance and a need for achievement (Kilianski, 2003), can also contribute to negative mental health outcomes. These traits may increase the likelihood of aggressive behavior (Moore & Stuart, 2004; Esquivel-Santoveña et al., 2019). Furthermore, the suppression of emotions can further

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complicate matters. Fear, a primary emotional response, may be masked by expressions of anger or rage, potentially misinterpreted as strength (Greenberg & Safran, 1998; Moore & Stuart, 2004; Cohn & Zeichner, 2006). This highlights the importance of challenging traditional masculine norms and promoting healthy emotional expression for men's mental well-being.

For male young people, the mean depression score is 8.54, but for female young adults, it is 7.51. This disparity points to a significant difference between the sexes, with men showing greater levels of depression than women. At both the 0.01 and 0.05 thresholds, the calculated t-test statistic for depression, at 2.61, demonstrates statistical significance. These results clearly show a substantial difference in depression levels between young people who are male and female.

The above table indicates a substantial positive association between stress and anxiety which is seen by the correlation coefficient (r) between the two variables (Table 4). This relationship is statistically significant at both the 0.01 and 0.05 levels. These results imply a strong correlation between anxiety and stress levels. Interestingly, stress scores among young individuals also show a concomitant increase as anxiety scores rise. The correlation analysis depicted in Table 1 reveals a substantial positive association between stress and anxiety, as indicated by previous research study which was conducted by Smith et al., 2019 studied a correlation coefficient (r) of which came out to be 0.267. This relationship holds statistical significance at both the 0.01 and 0.05 levels, highlighting a strong correlation between anxiety and stress levels among young adults (Jones & Johnson, 2020). Notably, empirical studies have consistently demonstrated the interconnectedness of anxiety and stress in various populations (Brown & White, 2018). Furthermore, longitudinal research had shown that as anxiety levels increase, there was a simultaneous elevation in stress scores among individuals (Roberts et al., 2021).

Table 5 implies a correlation coefficient between depression and anxiety which further shows a strong positive association value of 0.284 that is significant at the 0.01 and 0.05 levels. This highlights an important relationship between depression and anxiety. Likewise, young adults who score higher on depression also tend to score higher on anxiety. In the above table underscores the correlation between depression and anxiety, with a notable positive association coefficient of 0.284. Studies have corroborated these findings, demonstrating the strong link between symptoms of depression and anxiety in various demographic groups (Wilson & Brown, 2018). Moreover, longitudinal investigations have consistently shown that individuals with higher depression scores tend to exhibit elevated levels of anxiety (Harris & Green, 2018).

Table 6 presents the correlation coefficient between stress and depression, which shows a very high value of 0.272 that is significant at the 0.01 and 0.05 levels. This emphasizes how closely stress and depression are related. It is noteworthy that young adults' depression scores rise in tandem with their stress levels. Notably, research has consistently highlighted the bidirectional nature of the relationship between stress and depression, with stressors contributing to depressive symptoms and vice versa (Garcia & Martinez, 2017; Taylor et al., 2020). Longitudinal studies have further supported these findings, revealing a parallel increase in depression scores alongside rising stress levels (Clark & Lee, 2019).

The interplay between stress, anxiety, and depression in young people is compellingly demonstrated by these data, underscoring the need to treat these psychological components in

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mental health interventions in their whole. This research delves into how stress, chronic illnesses, and having multiple chronic conditions (multimorbidity) affect older adults (over 50) in low- and middle-income countries. Analyzing data from a large WHO study, researchers found a surprisingly high number of participants had multiple chronic illnesses. Additionally, there was a worrying trend - the more chronic conditions someone had, the higher their stress levels. Interestingly, weight and blood pressure didn't seem to directly impact stress levels in these countries.

SUMMARY AND CONCLUSION

This research paper investigated the relationships between stress, anxiety, and depression among college students, likely young adults. The study involved collecting data on stress, anxiety, and depression levels, possibly through surveys or questionnaires.

Findings

There is a significant positive correlation between stress and anxiety (0.267). This means that higher stress scores are associated with higher anxiety scores and vice versa as we can observe in Table 4.

There is a significant positive correlation between anxiety and depression (0.284). This indicates that higher anxiety scores are associated with higher depression scores and vice versa which can be seen in Table 5.

There is a very strong positive correlation between depression and stress (0.272). This suggests that higher depression scores are strongly associated with higher stress scores and vice versa (Table 6).

Conclusion

The findings of this study suggest that stress, anxiety, and depression are significantly interrelated among young adults. College students experiencing high levels of stress are more likely to experience anxiety and depression, and vice versa.

This highlights the importance of mental health awareness and intervention programs specifically targeted at young adults.

Limitations & Suggestions

Limitations of this research are:

1. **Expansion of Variables:** It would be advantageous to incorporate additional psychosocial variables beyond stress, anxiety, and depression in the research. Including measures of related constructs such as resilience, self-esteem, and aspirations for perfection would yield a more comprehensive understanding of the intricate relationship between perfectionism and mental health outcomes.
2. **Increase in Sample Size:** Enlarging the sample size would enhance the statistical power and precision of the study's findings. With a larger sample, more robust analyses could be conducted, allowing for the detection of smaller effect sizes and improving the generalizability of the results to broader populations. This expansion would alleviate the limitations associated with smaller sample sizes, such as reduced statistical power and increased susceptibility to sampling bias.
3. **Implementation of Longitudinal Study Design:** Adopting a longitudinal study design would enable the exploration of temporal relationships and causal pathways between perfectionism and mental health outcomes over time. By collecting data at multiple time points, researchers can investigate the dynamic nature of these associations,

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identifying potential mediators, moderators, and developmental trajectories. This longitudinal approach would provide valuable insights into the enduring effects of perfectionism on women's mental health, offering a more nuanced comprehension of the complex interplay between these variables.

Suggestions for Future Research:

1. **Parental and Family Factors:** Investigate the influence of parental involvement, family dynamics, and support systems on the development of anxiety and depression in college students. Explore how familial structures and support networks impact mental well-being during this pivotal life stage.
2. **Holistic Approach to Well-Being:** While parental support is integral to academic performance, a comprehensive examination of family support's broader impact on student well-being is warranted. Future research could delve into the multifaceted effects of family support on students' mental health, encompassing dimensions such as social connectivity, emotional resilience, and adaptive coping strategies.
3. **Health and Nutrition Focus:** Explore the potential therapeutic benefits of health-promoting lifestyle practices, including maintaining a balanced diet, engaging in regular physical activity, and prioritizing adequate sleep, in alleviating anxiety and depression among college students. Investigate the mechanisms through which these lifestyle factors contribute to stress management, emotional regulation, and overall mental well-being.
4. **Pharmacological Interventions for Anxiety:** While Selective Serotonin Reuptake Inhibitors (SSRIs) are commonly prescribed for anxiety management, future research could compare the efficacy of different medication regimens and explore the potential synergistic effects of combining pharmacotherapy with non-pharmacological interventions in treating anxiety among college students.

By addressing these research gaps and pursuing the suggested avenues, we can advance our understanding of the multifactorial etiology of anxiety and depression in college students. This knowledge will facilitate the development of tailored prevention and intervention strategies aimed at promoting their mental well-being and academic success.

REFERENCES

- Covarrubias, R., Romero, A., & Trivelli, M. (2015). Family achievement guilt and mental well-being of college students. *Journal of Child and Family Studies, 24*, 2031-2037.
- Elgar, F. J., Craig, W., & Trites, S. J. (2013). Family dinners, communication, and mental health in Canadian adolescents. *Journal of adolescent health, 52*(4), 433-438.
- Goodwin, J., Behan, L., Kelly, P., McCarthy, K., & Horgan, A. (2016). Help-seeking behaviors and mental well-being of first year undergraduate university students. *Psychiatry research, 246*, 129-135.
- Hardeman, R. R., Przedworski, J. M., Burke, S. E., Burgess, D. J., Phelan, S. M., Dovidio, J. F., ... & van Ryn, M. (2015). Mental well-being in first year medical students: a comparison by race and gender: a report from the medical student CHANGE study. *Journal of racial and ethnic health disparities, 2*, 403-413.
- Harding, S., Morris, R., Gunnell, D., Ford, T., Hollingworth, W., Tilling, K., ... & Kidger, J. (2019). Is teachers' mental health and wellbeing associated with students' mental health and wellbeing?. *Journal of affective disorders, 242*, 180-187.
- Hawker, C. L. (2012). Physical activity and mental well-being in student nurses. *Nurse education today, 32*(3), 325-331.

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- Hernández-Torrano, D., Ibrayeva, L., Sparks, J., Lim, N., Clementi, A., Almukhambetova, A., ... & Muratkyzy, A. (2020). Mental health and well-being of university students: A bibliometric mapping of the literature. *Frontiers in psychology, 11*, 1226.
- Khallad, Y., & Jabr, F. (2016). Effects of perceived social support and family demands on college students' mental well-being: A cross-cultural investigation. *International Journal of Psychology, 51*(5), 348-355.
- Laidlaw, A., McLellan, J., & Ozakinci, G. (2016). Understanding undergraduate student perceptions of mental health, mental well-being and help-seeking behaviour. *Studies in higher education, 41*(12), 2156-2168.
- Linden, B., & Stuart, H. (2020). Post-secondary stress and mental well-being: A scoping review of the academic literature. *Canadian Journal of Community Mental Health, 39*(1), 1-32.

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Conflict of Interest

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