# The Impact of Stress on Anxiety and depression

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#### ABSTRACT

Stress is caused by imbalance between resource and demand. Stress is caused by imbalance between resource and demand. When a person with one limited resources whether he/she unable to cater the demands goes through physical, mental and emotional struggle due to which cause to physiological and psychological dysfunctions. Anxiety leads to emotional feeling that creates tension, worries thought and ill health. It is a serious condition that negatively effect's one's feeling, thinking, thinking and behaviour. Depression is a very common illness that affects all people, regardless of age group, gender, socio-economic group and religion. Recent researches suggest that level of depression and anxiety among school children is on the increase. Researchers affirm that stress could be one of the causes of anxiety and depression. The study investigates the impact of stress on anxiety and depression among school students. The study also investigates the difference in the level of stress, depression and anxiety between boys and girls, and assesses the existence of correlation between anxiety and depression. Data was gathered from 100 school students living in Tirupattur, Vellore District, Tamil Nadu. DASS -21 scales was used to assess stress, anxiety and depression level of the school students. The samples were selected purposive sample. Regression analysis, t - test and Pearson's correlation analysis were used. The result asserts the causal effect of stress on anxiety and depression. Stress explains 45.6% of anxiety and 41.9% of depression. There is significant difference in the level of stress, anxiety and depression between boys and girls, and there exists significant positive correlation between anxiety and depression. The results were discussed, limitations were analyzed and future research scope was suggested.

**KEY-WORDS:** Stress, Anxiety, Depression, Adolescence, Male and Female.

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# I. INTRODUCTION

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In recent years, the suicide rate among school students has increased dramatically in India. Students over the age of 14 are more likely to commit suicide. The statistics from National Crime Records Bureau (NCRB) states that 40000 students in India have committed suicide in 5 years of time between 2011 and 2015. In recent years, the suicide rate among school students has increased dramatically in India. Students over the age of 14 are more likely to commit suicide. According to the World Mental Health Survey (2011) conducted in 17 countries, one in 20 people suffers from depression. India represents 21% of the world's youth population. The first community studies in India reported that the prevalence of mental disorders in childhood was 2.6% to 35.6%. It is observed that most suicides in India are committed by people under 30 years of age. Like all young people, undergraduates must deal with the psychological and socio-psychological changes associated with the development of autonomous personal life. High expectations for academic performance create a very stressful environment. If not treated in time, it may endanger your physical and mental health. Researchers suggest that among the various predictors of anxiety and depression, stress plays a pivotal role (Khan & Khan, 2017). Anxiety and depression are the main factors leading to suicide.

### DEPRESSION

According to APA (American Psychiatric Association). Depression is a common and serious illness that can negatively affect how you feel, think, and act. Depression is one of the major diseases in the world (Sarokhani, 2013). This is an extremely common disease that affects people of all ages, genders, socioeconomic groups and religions. WHO-The World Health Organization defines depression as a mental disorder characterized by depression, lack of interest or pleasure, guilt or low self-esteem, sleep or appetite disorders, lack of energy, and inattention. Depression is a common disease in all students of every age (Jha, 2017). There are many factors that cause depression in students. Depression often starts at a young age (Sandal, 2017). The early adolescent developmental stage suggests that family environment and quality of parenting will strongly influence vulnerability to depression (Granberg, 2008). The other causes of depression are socio – economic

status (Faeq, 2016). The family problems, school failure and particularly in adolescents, the suicide rates, substance abuse and absenteeism increase depression (Emslie & Mayes, 1999). The common psychological problems among students are depression, anxiety and stress (Dyrbye, 2006). Puberty is a period of transition. Depression usually begins at a young age, reduces people's function, and often returns

## ANXIETY

Anxiety is a normal human emotion that holds behavioral, affective and cognitive responses to the perception of danger within (Trivedi, 2010). Anxiety is the most common disease in children and adolescents (Mohapatra, 2014). The average level of anxiety in today's high school students is equal to the average level of anxiety of psychiatric patients in the early 1950's (Leahy, 2008). A research in the city of Mumbai suggests 11% of regular school students from standards 3<sup>rd</sup> to 10<sup>th</sup> standard have symptoms of overall anxiety (Karande, 2018). In India, the main documented cause of anxiety among school children and adolescents is parents high educational expectations and pressure for academic achievement (Deb, 2001). Students consistently perceive examination as a source of anxiety (Beri, 2015). The period of puberty where significant biological, psychological, and social changes take makes them vulnerable to anxiety (Hayward, 2003).

### STRESS

Stress is simply a reaction to a stimulus which interrupts the physical and mental parity (Thakur, 2017). It can be also defined as 'any challenge to homoeostasis', or to the body's internal sense of balance (Bansal, 2006). Even an internal perception of a stressful situation can cause anxiety and when the intensity of stress is high it leads to depression (Thakur, 2017). Increased stress levels lead to psychological problems like depression and anxiety (Waghachavare, 2013). The reason is due to the imbalance between resources and demand. When a person is unable to meet their needs with limited resources, they experience physical, mental and emotional difficulties. It causes various physiological and psychological dysfunctions. A little stress is always good and welcome. In classification, stress can be positive and negative. Positive stress called eustress improves our performance. Negative stress known as stress is bad for our health. Several studies have shown a number of risk factors associated with these feelings; problems. Among students, the lowest students have a higher stress response than the elders, possibly due to the difficulty in adjusting to the new environment (Aysan et al., 2001). The word stress implies an experience of negative emotions that follows predictable physiological, biochemical, and behavioral changes intended to alter the stressor or alter its effects. (Baum A, 1990). If the stress is continued or prolonged, it can leave adverse effects on body's immune, cardiovascular, neuroendocrine and central nervous systems (Anderson N B, 1998). If chronic stress is not treated, it can cause serious disorders such as insomnia, weakened immune system, high blood pressure, anxiety and muscle aches. It can also play a role in developing major disorders like depression, heart disease and obesity (Baum A, and Polsusnzy D, 2000). A 2006 study by Ardayfio and colleagues showed how chronic stress can cause anxiety and depression. It has become clear that long-term exposure to the stress hormone cortisol causes symptoms of depression. According to this study, stress hormones help a person in responding to an immediate threat (Van Praag H M, 2005). According to some studies, people with high stress have physical and mental dissatisfaction. From a public health perspective, early detection and prevention of mental health problems in young adults at the university is essential. Understanding psychological distress such as depression, anxiety and stress and their correlation can allow appropriate screening and intervention programs to prevent mental health problems in the population. This is crucial to the outcome of their education, future career development and national success, as young people today are tomorrow's leaders.

## II. REVIEW OF LITERATURE

In this research studies revealing the impact of stress on anxiety and Depression among School going adolescent in Tirupattur, Vellore District, Tamil Nadu. The major objective of this research is to become aware of the previous studies and investigation done on the topic of present study.

### Theory of General Adaptation Syndrome

Hans Selye brought out the theory of general adaptation syndrome (GAS). It is a three – stage process (Alarm reaction stage, Resistance stage and Exhaustion stage), which explains the physiological changes due to stress. According to this theory, in the alarm reaction stage initial symptoms of stress is experienced in the body. In this a distress signal is sent to the hypothalamus which in turn releases the glucocorticoids hormone. Glucocorticoids stimulate the secretion of the stress hormones adrenaline and cortisol.. This stage is know as a"fight or flight" response to stress. Secondly in resistance stage the body begins to repair it self. It releases a lower amount of cortisal to normalize the heart rate and blood pressure. In this stage one feels frustration and poor concentration. And finally the exhaustion stage is the result of prolonged or chronic stress. In this stage

person feels no strength to flight against stress in physically, emotionally, and mentally. At this stage stress causes one feel fatigue, burnout depression, anxiety and decreased stress tolerance.

Sarah Khan, and Rafeeq Alam Khan (2017) conducted a study on chronic stress leads to Anxiety and Depression among Department of Pharmacology, University of Karachi. The goal of the study was to assess the chronic stress leads to anxiety and depression. In this studies have found a link between chronic stress and anxiety disorders as well as major depressive disorder.

Fahimeh Kashani, Parisa Kashani, Maryam Moghimian, and Mahsa Shakour (2015), conducted a study on effect of stress inoculation training on the levels of stress, anxiety, and depression in cancer patients from the chemotherapy clinic of Seyed AI – Shohada hospital of Isfahan Forty patients with cancer who were eligible for the study were randomly assigned to either case or control group. The case and control groups had the same treatment plans, and the only difference was stress incoculation training administered in the case group, which was composed of eight 90 – min sessions over 8 weeks. By using the Depressions Anxiety, Stress Scales (DASS – 42). They were used some tests for statistical analysis as covariance (ANCOVA) and t test. The result showed that there was a significant difference between case and control groups in terms of stress anxiety, and depression (P<0.001). Stress incoculation training reduced stress, anxiety and depression in cancer patients. The Stress incoculation training significantly reduced stress, anxiety, and depression. Therefore, teaching this skill and the strategies of coping with stress is recommended for these patients, in addition to medicational treatment.

Joseph D. Hovey, and Cristina Magana (2000), conducted a study on Acculturative Stress, Anxiety, and Depression among Mexican Immigrant Farm workers in the Midwest United States. The Sample size was 45 Mexican migrant farm workers consisting both male (n=25) female (n=20). The overall sample revealed elevated levels of anxiety and depression Immigrant farm workers with heightened levels of acculturative stress reported high levels of anxiety and depression.

Raman Kumar Sandal, Naveen Krishan Goel, Manoj Kumar Sharma, Ravleen Kaur Bakshi, Navpreet Singh and Dinesh Kumar (2017), conducted a study on Prevalence of Depression, Anxiety and Stress among school going adolescent in Chandigarh. Consisting both male (n=257) female (n=213). The sample size was 470 students. The sample was selected randomly. The goal of the study was to assess the mental health status of school going adolescents in Chandigarh. By using the questionnaire DAS scale (DASS-21) was used. They were used some tests for statistical analysis as chi – square test, or correlation were used. The result showed that prevalence of DAS was 65.53%, 80.85% and 47.02%, respectively. Overall, comorbidity between depression and anxiety was 57.65%. Extremely severe depression was very less (3%).

The prevalence of DAS was higher in women. For depression and anxiety, the maximum age was 18. The prevalence of DAS was high among young people attending Chandigarh schools. According to a related study, about half of college students have intermediate levels of stress associated with mental health problems, including anxiety and depression (Regehr, 2013). According to previous epidemiological studies, women generally tend to experience more mental problems than men for two reasons. First, the physiological differences between women and men (eg, genetic vulnerabilities, hormone and cortisol levels, etc.) can be reflected emotionally and behaviorally (Hankin & Abramson, 1999).

By contrast, other researchers insisted that male students were more likely to experience depressive disorder than female students (Al Qaisy, 2011; Wong et al, 2006). According to many studies, the academic achievement of school and college students is affected by depression (Stark and Brookman, 1994), anxiety (Anson et al., 1984), and stress symptoms (Dusselier et al., 2005) which may impair their academic achievement (Stewart Brown et al., 2000).

#### Statement of the problem

The impact of stress on anxiety and depression among High School Students

#### **Objectives of Study**

- To examine the impact of stress on depression
- To examine the impact of stress on anxiety
- To examine the positive correlation between depression and anxiety

To examine the stress on male and female

To examine the depression on male and female

To examine the anxiety on male and female

#### Hypotheses of the study

A research suggests that stress could be a predictor of depression and anxiety. Hence it is hypothesized that stress predicts anxiety and depression (Khan & Khan, 2017). Another research that was conducted among cancer patients affirms that stress is one of the most important psychological factors influencing the occurrence of physical diseases, and can lead to severe anxiety, depression and negative effects on the health (Kashani et al, 2013). Hence it is hypothesized that stress predicts depression and anxiety.

#### H1: Stress predicts depression

H2: Stress predicts anxiety

A research suggests that there is high correlation between the anxiety and depression (Hovey & Magana, 2000). Hence it is hypothesized that there is positive correlation between depression and anxiety.

H3: There is a positive correlation between depression and anxiety.

Researches done in among school going children in India suggest that the level of depression, anxiety and stress is high in girls than boys (Sandal, 2017; Bhasin, 2010). Hence it is hypothesized that the level of stress, anxiety and depression is greater among girls.

H4: The level of stress among girls is greater than that of boys

H5: The level of anxiety girls is greater than that of boys

H6: The level of depression among girls is greater than that of boys.

## III. METHODOLOGY

#### Participants

The present study samples were selected from school students living in Tirupattur, Vellore Distristic, Tamil Nadu. The sample has 100 school students in each 50 male students and 50 female students. The subject selected in this sample was age group of 14 - 18 year.

#### **Research Design**

Hence descriptive research design in employed in this research. Descriptive research design is used to understand the phenomenon numerically. The objective of the research used to understand the value of college students. The research adopted a descriptive research design. It is a systematic approach to explain the reality. In this study, the researcher analyses the impact of stress on anxiety and depression among High school students. Through this method, the variables and the hypothesis are analyzed and described in a systematic manner.

#### Variable of the Study

Independent Variables - Anxiety / Depression

Dependent Variables - Stress

#### Tools

The Depression, Anxiety and Stress Scale – 21 items (DASS – 21) is a set of three self – report scales designed to measure the emotional states of depression, anxiety and stress. Each of the three DASS – 21 scales contains 7 items; divide into subscales with similar content. The depression scale assesses dysphonic, hopelessness, devaluation of life, self-deprecation, lack of interest / involvement, anhedonia and inertia. The anxiety scale assesses autonomic arousal, skeletal muscle effects, situational anxiety, and subjective experience of anxious affect. The stress scale is sensitive to levels of chronic non-specific arousal. It assesses difficulty relaxing, nervous arousal, and being easily upset / agitated, irritable/ over – reactive and impatient. Scores for depression, anxiety and stress are calculated by summing the scores for the relevant items. Recommended cut-off scores for conventional severity labels (normal, moderate, severe) are as follows:

	Depression	Anxiety	Stress
Normal	0-9	0-7	0-14
Mild	10-13	8-9	15-18
Moderate	14-20	10-14	19-25
Severe	21-27	15-19	26-33
Extremely Severe	28+	20+	34+

Scores on the DASS-21 will need to be multiplied by 2 to calculate the final Score.

ASPECT	NAME OF THE TEST	AUTHOR	INFORNATION
DASS-21	Depression Anxiety Stress	Lovibond S.H Lovibond D.F	Item - 21
	Scales	(1995)	Reliability – 0.82
			Validity – 0.72

#### Procedure

DASS-21 was administered individually on each male and female college students. Prior to data collection, the investigator established rapport with patients and informed consent was also obtained from the students. They were assured that their responses would not be Share with anyone else and keep confidentiality.

After the collection of data the responses obtained on DASS-21 were scored manually by the investigators. **Data Analysis** 

Regression analysis, t test and Pearson's correlation was used to examine the impact of stress on anxiety and depression among school going students on DASS 21.

# IV. RESULT

This chapter deals with the analysis of data, its related results, tables and figures. Regression analysis Pearson's Product Moment correlation, t test and descriptive statistics are the statistical analysis used in the study.

#### **Table1:** Indicating the impact of Stress on Anxiety.

#### Model Summary

Model	R	R Square	Adjusted R Square	Std.Error of Estimate	the
1	.680	.462	.456	4.261	

Predictors: (Constant), Anxiety Score

### ANOVA

Model	Sum of Squares	df	Mean Square	F	Sig
1 Regression	1526.347	1	1526.347	84.063	0.000
Residual	1779.413	98	18.157		
Total	3305.760	99			

The results of regression analysis indicates that 45.6% of Anxiety (M=7.91, SD=5.21) is predicted by Stress (M=9.68, SD=5.77)  $r^2 = .462$ , F(1,98) = 84.0, p<.01.

ANOVA Table (test using alpha = .05) the overall regression model was significant.

#### **Table2:** Indicating the impact of Stress on Depression

N	Model Summary							
	Model	R	R Square	Adjusted R Square	Std. Error of the			
					Estimate			
	1	.652	.425	.419	4.406			

Predictors: (Constant), Depression Score

#### ANOVA

Mode	Sum of Squares	df	Mean Square	F	Sig
1 Regression	1403.576	1	1403.576	72.312	.000
Residual	1902.184	98	19.410		
Total	3305.760	99			

Dependent variable: Stress Score

Predictors (Constant), Depression Score

The result of regression analysis indicates that 41.9% of depression (M=8.88, SD=6.15) is predicted by stress (M=9.68, SD=5.77)  $r^2 = .425$ , F(1,98) = 72.31, p<.01.

ANOVA Table (test using alpha = .05) the overall regression model was significant.

Variable	Gender	Ν	Mean	SD	t value	p value
Stress	Male	50	12.28	6.866	.000	<.05
	Female	50	7.08	2.554		
Anxiety	Male	50	10.02	6.229	.000	<.05
	Female	50	5.80	2.657		
Depression	Male	50	11.52	7.393	.000	<.05
	Female	50	6.24	2.752		

Table 3: Gender difference in Stress, Anxiety and Depression

Independent Sample t test was used to identify the difference in the level of Stress, Anxiety and depression between Male and Female. The result suggested the level of Stress of male (M= 12.28, SD = 6.866) is significantly greater the stress of female (M= 7.08, SD= 2.554), t = .000, p= .00. The result suggested that there is significant difference in Anxiety in the male (M= 10.02, SD = 6.229) and female (M= 5.80, SD = 2.657), t = .000, p = .00. The result suggested that the level of Depression of Male (M = 11.52, SD = 7.393) is significantly greater than the Depression of female (M = 6.24, SD = 2.752), t = .000, p = .00.

**Table 4:** Relationship between depression and anxiety

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Variable	Ν	Mean	SD	r			
Depression	100	8.88	6.152	0.726**			

Anxiety	100	7.91	5.215	
P= <0.05	100	1.71	5.215	

There was a positive correlation between the two variables, r = 0.726, n = 100, p = 0.000.

The table -4 indicates that there was a positive relation between depression and anxiety with r = 0.726, p<0.05 significant level. It was inferred from the r value that depression was positive related to anxiety among students. Hence the hypothesis three which states that would be significant positive relation between depression and anxiety among students. the result implies that if depression scores increases then there was an increase of score in the anxiety.

#### V. DISCUSSION

The study examined the impact of stress on anxiety and depression. The researcher collected data from 100 students from Tirupattur, Vellore District, Tamil Nadu. The DASS 21 questionnaire was used to collect data. It was found that assert the causal effect of stress on anxiety and depression. Stress explains 45.6% of anxiety and 41.9% of depression. There is significant difference in the level of stress, anxiety and depression between boys and girls, and there exists significant positive correlation between anxiety and depression. The result asserts the causal effect of stress on anxiety and depression. It confirms the previous finding of khan and khan (2017) who suggested that the chronic stress would lead to anxiety and depression. The research also affirms the result of Hovey and Magana (2000) who indicated the relationship between anxiety and depression. The result did not affirm the findings of Sandal (2017) and Bhasin (2010) who suggested that anxiety depression and stress of girls were significantly higher than that of boys. The First hypothesis of the study was about stress predicts depression. The result of the study indicated that stress positive predicts the depression. So the hypothesis was accepted. The result of the study contradicts the finding of Khan & Khan, (2017) and Kashani et al, (2013). Who found the significant in stress and anxiety. The finding of the study support the previous studies. The Second hypothesis of the study was about stress predicts Anxiety. The result of the study indicated that stress positive predicts the anxiety. So the hypothesis was accepted. The result of the study contradicts the finding of Khan & Khan, (2017) and Kashani, et al, (2013). Who found the significant in stress and anxiety. The finding of the study support the previous studies. The third hypothesis of the study was about positive correlation between depression and anxiety. The result of the study indicated the there is positive correlation between depression and anxiety. So the hypothesis was accepted. The result of the study contradicts the finding of Hovey & Magana, (2000). Who found the positive correlation between the depression and anxiety. The finding of the study support the previous studies. The fourth hypothesis of the study was about there is significant difference male and female school students on depression, anxiety and stress. The results of the study indicated that depression, anxiety and stress showed significant differences between men and women. My researcher claims that anxiety, depression and stress are significantly higher among men than women because compared to female students, men are culturally responsible for of their lives, here may be responsible for higher anxiety, depression, and stress. The results do not confirm the conclusions of Sandal (2017) and Bhasin (2010), who suggested that women's anxiety, depression and stress were significantly higher than that of boys. Table1: of the current study also indicating the impact of Stress on Anxiety. The results of regression analysis indicates that 45.6% of Anxiety (M=7.91, SD=5.21) is predicted by Stress (M=9.68, SD=5.77)  $r^2 = .462$ , F(1,98) = 84.0, p<.01. Table2: of the current study also indicating the impact of Stress on Depression. The result of regression analysis indicates that 41.9% of depression (M=8.88, SD=6.15) is predicted by stress (M=9.68, SD=5.77)  $r^2 = .425$ , F(1,98) = 72.31, p<.01. The Table 3: of the current study also indicating Gender difference in Stress, Anxiety and Depression. Independent Sample t test was used to identify the difference in the level of Stress, Anxiety and depression between Male and Female. The result suggested the level of Stress of male (M= 12.28, SD = 6.866) is significantly greater the stress of female (M= 7.08, SD= 2.554), t = .000, p= .00. The result suggested that there is significant difference in Anxiety in the male (M= 10.02, SD = 6.229) and female (M = 5.80, SD = 2.657), t = .000, p = .00. The result suggested that the level of Depression of Male (M = 11.52, SD = 7.393) is significantly greater than the Depression of female (M = 6.24, SD = 2.752), t = .000, p = .00. The results suggested that there is significant difference in Anxiety in the male (M = 10.02, SD = 6.229) and female (M = 5.80, SD = 2.657), t= .000, p = .00. The result suggested that the level of depression of Male (M = 11.52, SD = 7.393) is significantly greater than the depression of female (M = 6.24, SD = 2.752), t = .000, p=.00. The Table 4: of the study also indicating relationship between depression and anxiety. There was a positive relation between depression and anxiety with r = 0.726, p<0.05 significant level. It was inferred from the r value that depression was positive related to anxiety among students. Hence the hypothesis three which states that would be significant positive relation between depression and anxiety among students. The result implies that if depression scores increases then there was an increase of score in the anxiety. It is certain from the results that stress plays an important role in creating anxiety and depression. Researchers have also affirmed that the level of stress among school going students are steadily increasing. Psychologists have speculated on the possible

reasons for the increase. One of the reasons may be a decrease in social connectedness or social support. Children born in nuclear family are deprived of healthy interpersonal relationship. Added to that, addiction to electronic gadgets, video games and internet leads to one experience physical problems, anxiety, sleep disturbances, depression, psychological distress and an unhealthy lifestyle (Thomee, 2011), which in turn increases stress. A research suggests that adolescents in Thailand are spending more and more time in playing video which leads to depression, anxiety, and stress (Rujataronjai and Varma, 2017). Other factors such as academic pressure, lack of parental care, depression level of parents (Olfson et al. 2003), peer pressure, verbal abuse, physical fight, and bullying (Khawaja S, 2015) also cause stress, depression and anxiety. Increased awareness of stress, anxiety and depression among this age group is the first step toward implementing effective intervention. In school, teens can learn to deal with stress and anxiety. Strong positive family relationships could lessen the symptoms of depression (Greenberger et al., 2000). Depression is decreased by higher levels of parental care and lower levels of parental indifference. Parental-adolescent relationship has to be improved. Researchers suggest that Physical exercise will control the level of stress. Thus some coping skills and positive training are suggestible to control negative effects stress, depression and anxiety. Like any other study, this study has its own limitations. Primarily, in this study, there was only one demographic variable. Taking this into account, future research may include any of these demographic variables for the study in order to obtain more convincing results. Though the sample size of 100 is good enough for regression analysis, bigger samples could have offered results with greater clarity. Another limitation is that data was gathered only from students living in the rural area. Future researchers can increase the sample size and collect sample from students living in rural and urban area. The result suggests that only 54.6% anxiety and 41.9% of depression is predicted by stress. This study opens up for further research to identify the other predictors of anxiety and depression. Since the results contradicts the earlier finding regarding the gender difference with regard to stress, anxiety and depression, future research can analyze the role gender in the stress, anxiety and depression among school students.

## VI. CONCLUSION

The main findings of the study were that the impact of stress on anxiety and depression. It has been found that only 45.6% of anxiety and 41.9% of depression is predicted by stress. It has been found that male students had higher stress, anxiety and depression compared to female students. Also found that there was positive correlation between depression and anxiety.

### IMPLICATION

The researcher gives the following implications. The results of the study were based on a very small sample. However, given the limitations of the current study, we recommend that in the future. Research data can be enhanced and random sampling techniques can also be used to obtain more accurate results. Other variables such as age and education can also be studied. In addition, future studies may use a large sample size and take into account other relevant variables such as self-confident attitudes, IQ, motivation, family background or socioeconomic status to examine their effect on self-esteem

#### REFERENCES

- [1]. Bakhla, A.K., Sinha, P., Sharan, R., Binay, Y., Verma, V. & Chaudhury, S. (2013). Anxiety in school students: Role of parenting and gender. *Industrial psychiatry journal*, 22(2), 131-7.
- [2]. Bayram, N. & Bilgel, N. (2008). The prevalence and socio-demographic correlations of depression, anxiety and stress among a group of university students. *Social Psychiatry and Psychiatric Epidemiology*, 43(8), 667-672.
- [3]. Bhasin, S. K., Sharma1, R. & Saini, N.K. (2010). Depression, Anxiety and Stress among Adolescent Students Belonging to Affluent Families: A School-based Study, *Indian Journal of Pediatrics*, 77, 161 -165.
- [4]. Bayram, N. & Bilgel, N. (2008). The prevalence and socio demographic correlations of depression, anxiety and stress among a group of university students. *So Psychiatry Psychiatry Epidemiol* (2008) 43: 667-672.
- [5]. Beiter, R., Nash, R., Mccrady, M. & Sammut, el al. (2015). The prevalence and correlates of depression, anxiety, and stress in a sample of college students. *Journal of Affective Disorders* 173 (2015) 90-96.
- [6]. Gao, W., Ping, S. & Liu, X. (2019). Gender differences in depression, anxiety and stress among college students : A longitudinal study from china.
  - https://www.sciencedirect.com/science/articale/pii/S0165032719320385.
- [7]. Greenberger, E., Chen. & Tally, R. S. (2000). Family, Peer, and Individual correlates of Depressive Symptomatology among U.S. and Chinese Adolescents. *Journal of consulting and clinical psychology*, 68(2), ISSN 0022-006X.

- [8]. Hovey, D. J. & Magana, C. (2000). Acculturative Stress, Anxiety, and Depression among Mexican Immigrant Farm workers in the Midwest United States. *Journal of Immigrant Health*, Vol.2, N. 3, 2000.
- [9]. Khawaja, S., Khoja, A. A. & Motwani, K. (2015). Abuse among school going adolescents in three major cities of Pakistan: Is it associated with school performances and mood disorders. *Journal of the Pakistan Medical Association*, February (2015).
- [10]. Kashani, F., Kashani, P., Moghimian, M., & Shakour, M. (2015). Effect of stress inoculation training on the levels of stress, anxiety, and depression in cancer patients. Journal of Nursing and Midwifery Research May 2015, https://www.researchgate.net/publication/279631303.
- [11]. Khan, S. & Khan, A.R. (2017). Chronic Stress Leads to Anxiety and Depression. 1(2017), ISSN 2374-0124.
- [12]. Le, H.T.M., Tran, D.T., Holton, S., Ngugen, T.H., Wolfe, R., & Fisher, Jane. (2017). Reliability, convergent validity and factor structure of the DASS-21 in a sample of Vietnamese adolescents. https://doi.org/10.1371/journal.pone.0180557.
- [13]. Sandal, K.R., Goel, K.N., Sharma, K.M., Bakshi, K.R., Singh, N. & Kumar, D. (2017). Prevalence of Depression, Anxiety and Stress among school going adolescent in chandigarh. http://www.jfmpc.com on Friday, December 22,201, IP: 176.59.109.3.
- [14]. Shamsuddin, K., Fadzil, F., & Ismail et al. (2013). Correlates of depression, anxiety and stress among Malaysian university students. Asian J. Psychiatry (2013), http://dx.doi.org/10.1016/j.ajp.2013.01.014.
- [15]. Sarkar, S., Gupta, R. & Menon, V. (2018). A Systematic Review of Depression, Anxiety, and stress among Medical Students in India. <u>https://www.researchgate.net/publication/324825146</u>.
- [16]. Sarokhani, D., Delpisheh, A., Veisani, Y., Sarokhani, M. T., Esmaelimanesh, R., & Sayehmiri, K. (2013). Prevalence of Depression among University Students: A Systematic Review and Meta-Analysis Study. *Depression research and treatment*.
- [17]. Selye Hans. (1950), Stress and The General Adaptation Syndrome, *British Medical Journal*, pp.1383 1392.
- [18]. Thakur. Lakshameshwar. (2017), "Stress Psychology", Ishika Publishing Hose, pp. 1
- [19]. Trivedi, J.K. & Gupta, P. K. (2010). An overview of Indian research in anxiety disorders. *Indian journal of psychiatry*, *52*, 210-218.
- [20]. Waghachavare, V.B., V.M. Chavan., G.B. Dhumale. & A.D. Gore (2013), "A Cross-Sectional Study of Stress among Junior College Students in a Rural Area of Sangli District of Maharashtra", *Innovative Journal of Medical and Health Science*, November – December, pp. 294 – 297

Sakthivel K. "The Impact of Stress on Anxiety and depression." *IOSR Journal of Humanities and Social Science (IOSR-JHSS)*, 26(11), 2021, pp. 35-42.