

Mental Health Survey Across Various Age Groups in Sreekrishna College and the Surrounding Areas of Thrissur, Kerala

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Abstract

The present study comprises a comprehensive survey on mental health across various age groups of Sreekrishna College and nearby area with a total of 244 responses. Key columns include demographic information such as age, gender, and current occupation, alongside mental health indicators like substance use, social interactions, and emotional well-being. The survey captures a wide range of data points, including dietary habits, sleep patterns, and personal perceptions of mental health. The data reveals that many respondents experience stress and anxiety, with some indicating a need for mental health support. This data not only highlights the urgency of addressing these issues but also points to specific demographic areas where intervention may be most beneficial.

Keywords: Mental Health, Depression, Anxiety, Sleep problems, Mobile Usage.

Introduction

Mental health is a crucial aspect of overall well-being that affects individuals across all age groups. Globally, the prevalence of depression among adolescents is estimated as 10–20%, according to the World Health Organization⁽¹⁾. In India, the National Mental Health Survey⁽²⁾ reported that nearly 15% of adolescents face mental health issues, with depression being a primary concern. Kerala, known for its high literacy rates and progressive social indicators, still faces challenges related to mental health. Mental health studies of previous workers^(6,7,8,9,10,11,12,13,14,15) highlights the importance of mental issues among adolescence. Kerala, despite its high literacy and healthcare indices, reported the alarming rates of adolescent mental health issues. The mental issue problem among Adolescence (13-19 years) are anxiety disorders (social anxiety, generalized anxiety), depression, eating disorders, substance abuse, self-harm and suicidal ideation. The impact of social media, hormonal changes, peer pressure, academic stress, identity formation, increased exposure on social stress. Adulthood (20-35years) mental issues are Anxiety disorders, depression, bipolar disorder, schizophrenia, substance use disorders, post-traumatic stress disorder (PTSD). The factors contributing these mental issues are workplace stress, relationship problems, financial difficulties, life transitions, chronic health conditions. Nearly 20% of adolescents in Kerala exhibited symptoms of depression, with higher prevalence among urban adolescents due to lifestyle changes and academic stress^[3]. Factors such as parental migration, peer pressure, and addiction to social media further exacerbate the issue. This survey aims to assess the mental health status of individuals in

and around Sreekrishna College campus in Thrissur, focusing on different age groups to identify trends, concerns, and potential areas for intervention by the evaluation of the mental health status.

Methodology

Survey of Mental health among different age groups of students and peoples of Sreekrishna College, Guruvayur and nearby areas was our study area. It was done during the period July -October, 2024. An objective type questionnaire was prepared, categorized them to Adolescence, Adulthood and Adult on the basis of age. Survey was conducted among 244 members of people in Sreekrishna College, Guruvayur and nearby areas. An online survey was conducted with the questionnaires among the different group and the data recorded to assess mental health prevalence. Questionnaire includes various problems like sleep problems, eating habits, drug abuse, soft drink addictions, family relationship, peer relationship multiple relationship, etc. Anxiety and stress are our main focus of study. Ensure that student data and personal information are handled with utmost confidentiality. The survey was done maintaining confidentiality, recognizing and addressing the diverse cultural backgrounds and experiences of the age groups. Survey was conducted with the help of administrators, faculty, parents and mental health professionals to ensure a comprehensive and effective approach. The data collected were analysed and discussed scientifically. The Data was analysed using Power drill AI. Graphical presentation was used to analyse the data.

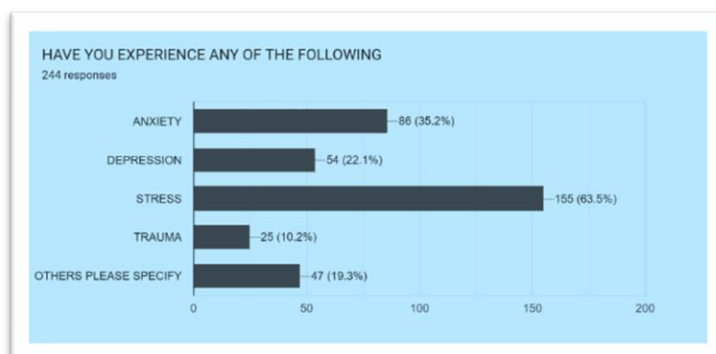
Results

In our study, response of adolescence age group (12-19) is 82, adulthood (20-30) is 147, Adults (30-45) 13 and 45-60 group 2 in number.. 79.9% of the survey groups are very much aware of Mental health and Mental Illness. 80.3 % of survey groups are studying in the campus while others are the peoples of nearby areas of Sreekrishna College. Most of our survey are responded by female 65.6%.

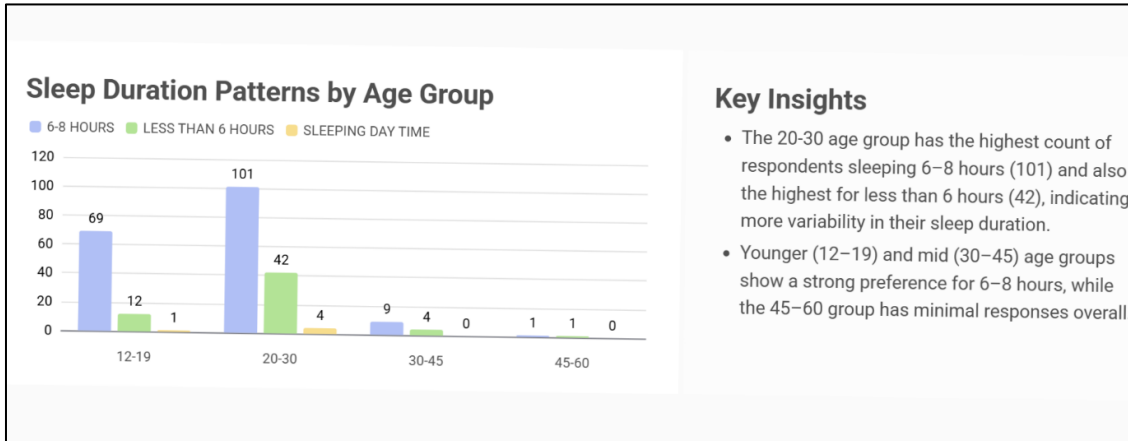
Emotional or Behavioural problems (Fig.1.)

Among the total survey groups 57.8 % responded that they have behaviour or emotional problems The percentage of their records are Anxiety 35.2 %, Depression 22.1%, Stress 63.5%, Trauma, 10.2% and Other problems 47 %.

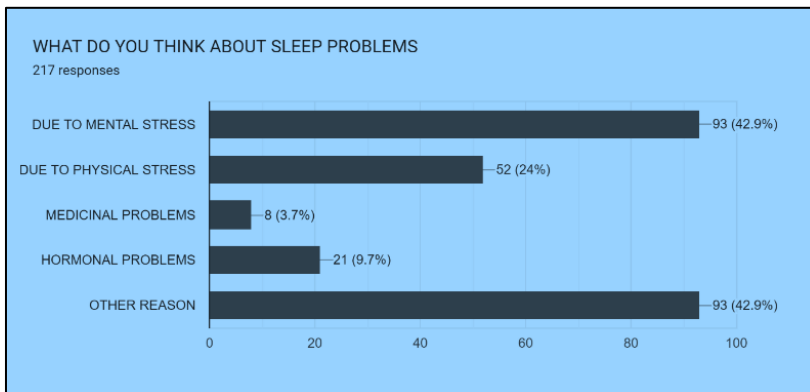
Fig.1.



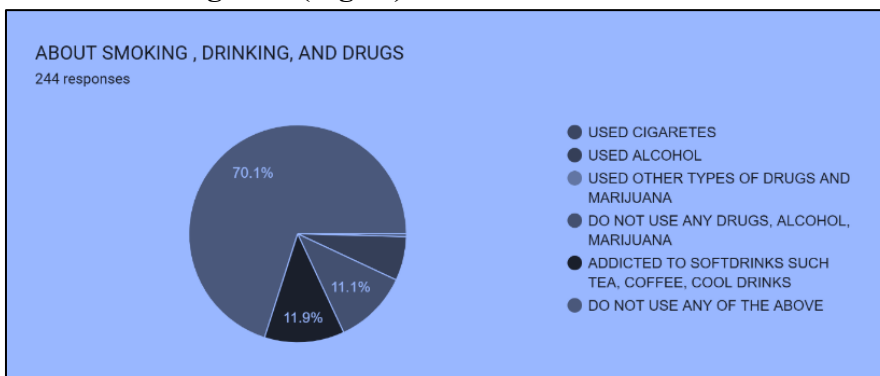
Sleep problems Fig.2.



Sleep Problems Fig. 3.



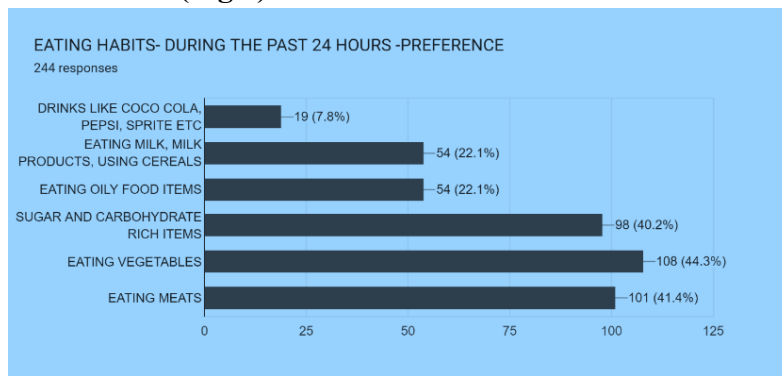
Substance using data (Fig. 4.)



Correlation Analysis

The habit of using narcotic and alcoholic substances is rare, however there are few responses, 7.8% soft drinks. The correlation coefficient between age and substance use is approximately 0.08. This is a very weak positive correlation, almost negligible. It suggests that as the age increases, the likelihood of substance use increases very slightly, but the relationship is not strong.

Food habits (Fig.5)



The eating habits "eating meats," "eating vegetables," and "sugar and carbohydrate rich items" have significantly high frequencies, with z-scores of 3.45, 2.78, and 2.56, respectively. A z-score greater than 2 indicates these habits deviate significantly from the norm. The eating habits "eating meats," "eating vegetables," and "sugar and carbohydrate rich items" are identified as anomalies due to their high frequency and z-scores. These habits may warrant further investigation to understand underlying reasons for their prevalence and potential health implications.

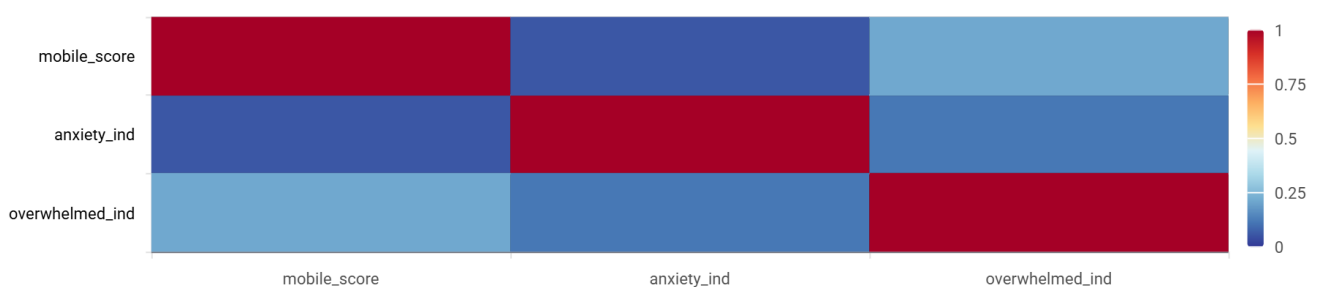
Mobile Usage Patterns

- **Age Group 12-19:** High percentage of regular usage (53.66%) and occasional usage (21.95%). Notably, 19.51% are addicted to mobile usage.
- **Age Group 20-30:** Predominantly regular users (70.75%), with occasional usage at 17.01%. A smaller percentage (8.84%) are addicted.
- **Age Group 30-45:** Majority are regular users (76.92%), with occasional usage at 23.08%. No reported addiction.

Among 30-45 age groups, majority are regular mobile usage, with no report of addiction, while 12-19 age group and 20-30 age group shows a higher tendency towards mobile addiction, which may warrant further investigation or intervention. It displays a higher addiction rate compared to other groups, indicating a potential area of concern.

Correlation study between mobile usage, anxiety and feeling overwhelmed

Correlation Heatmap



Data Selection: Relevant columns related to mobile usage, anxiety, and feeling overwhelmed were selected. Correlation coefficients range from -1 (perfect inverse) through 0 (no linear relationship) to $+1$ (perfect direct). Values between 0 and about ± 0.3 are considered very weak or negligible; 0.3 – 0.5 modest;

above 0.5 moderate to strong. Mobile use $\leftrightarrow$ Anxiety ≈ 0.058 . Virtually no linear association. Higher mobile-use scores do not go hand-in-hand with reporting anxiety in this sample. Mobile use $\leftrightarrow$ Feeling overwhelmed ≈ 0.213 . A very weak positive link. People who report heavier mobile use tend slightly more to report feeling overwhelmed, but the effect is small. Anxiety $\leftrightarrow$ Feeling overwhelmed ≈ 0.116 . Also a very weak positive association. Those indicating anxiety are a little more likely to say they've had emotional/behavioural problems, but again it's quite small.

Table. 1. Correlation data of Age, Stress, Sleep and Mobile use Different Age group

	Age	Stress	Sleep	Mobile Usage
Age	1.0	-0.1	~0.1	-0.3
Stress Score	-0.1	1.0	-0.5	+0.3
Sleep Hours	~0.1	-0.5	1.0	-0.4
Mobile Usage	-0.3	+0.3	-0.4	1.0

Table 2. Correlation Trends

Variable Pair	Expected Correlation	Description
Age $\leftrightarrow$ Stress	Slight Negative	Stress decreases with age
Age $\leftrightarrow$ Mobile Usage	Strong Negative	Younger = higher usage
Stress $\leftrightarrow$ Sleep	Strong Negative	More stress = poor sleep
Mobile Usage $\leftrightarrow$ Sleep	Moderate Negative	Screen time reduces sleep

Regarding happiness in their school, college and family

The highest proportion of females agree with the happiness statement (46.38%), followed by those who strongly agree (34.06%). A smaller percentage neither disagree nor agree (11.59%), and a few disagree (6.52%). All responses (100%) strongly agree with the happiness statement. Males show a higher percentage of strong agreement (47.25%) compared to agreement (38.46%). A smaller portion neither disagree nor agree (8.79%), and a few disagree (3.30%). Females and males both predominantly agree or strongly agree with the happiness statement, but males have a slightly higher percentage of strong agreement. A significant portion, 65.08%, of individuals who feel the need to discuss their mental health concerns take the step to seek help, indicating a proactive approach towards mental health management among those surveyed.

Discussion

The study of mental health across different age groups of Sreekrishna College and nearby areas, like in many regions is a topic of increasing concern. The mental health landscape in Kerala reflects significant challenges and opportunities within the context of a Mental Health Policy (2003, revised in 2013). This marked a pivotal step toward addressing mental health needs, the ongoing gaps in treatment and follow-up care. Academic stress, family conflicts, and societal expectations are identified as major contributors⁽⁴⁾ of mental health disorders. Conditions like anxiety, depression, and stress are becoming more prevalent. The pressures of academic, social and examination are creating significant stress among students.

Depression manifests as persistent sadness, irritability, and disinterest in daily activities, often leading to severe impairments in education, social interactions, and overall well-being ⁽⁵⁾.

In Kerala there are several reports of mental health study. The study of 702 school-going students ^(16,17) assessed mental health among adolescence (13–19 years). The recent sociocultural changes, poor social support, the breakdown of extended and joint families, the ambiguity of societal values, and increasing gap between aspirations and possible achievements, substance abuse are significantly affecting the mental health of adolescence ^(12,16,17,18). Depression and stress are more prevalent among school-going adolescent girls. Approximately 40%–90% of adolescents with depression have a comorbid psychiatric disorder such as anxiety disorders, conduct disorders, substance abuse, and personality disorders in the case of adolescents. Over half of all cases of depression had a first onset during childhood, adolescence, or young adulthood ⁽¹⁹⁾. Eating disorders such as bulimia, anorexia, and binge eating are common and often have their onset during adolescence with a rapid increase in risk during early adulthood. Survey of 2,822 college students reported that 9.5% of students screened positive for an eating disorder with a greater proportion of females relative to males (13.5 vs. 3.6 %, respectively) ⁽²⁰⁾. The peak periods of risk for onset were between 17 and 18 years of age for bulimia nervosa and binge-eating disorder, and was between 18 and 20 years for purging behaviour ⁽²¹⁾. Depression, anxiety and fear of missing out was correlated with social, non-social and problematic smartphone use⁽²²⁾. From the sample data, it is evident that the majority of respondents are in the 20-30 age group, with a significant portion engaged in studying. Common dietary preferences of them were eating vegetables and meats, while substance use is generally low, with many respondents abstaining from drugs and alcohol. Social interactions vary, with some individuals reporting strong friendships, while others struggle to maintain social connections.

Conclusion

The data reveals that many respondents experience stress and anxiety, with some indicating a need for mental health support. Sleep patterns are generally healthy, with most individuals getting 6-8 hours of sleep. However, there is a notable concern about mental stress affecting sleep quality. The survey also highlights the importance of physical activities and hobbies in managing mental stress, with many respondents engaging in exercise and entertainment as coping mechanisms. Overall, the dataset provides valuable insights into the mental health landscape across different age groups, highlighting areas for potential intervention and support to improve mental well-being. The study suggests to develop and implement mental health awareness campaigns on mental health resources and support services, organize workshops and seminars for students, faculty, and parents. Promote open and honest conversations about mental health, implement peer support programs, facilitate access to mental health professionals. Create safe spaces for students to express their feelings by promoting a culture of inclusivity and acceptance.

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