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EFFECTIVENESS OF LEARNING SKILLS IN ENHANCING MENTAL HEALTH AMONG ADOLESCENTS

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ABSTRACT:

Mental health is a state of mental well-being that enables individuals to cope with the stresses of life, realising their abilities to learn well, work well and contribute to their community. Mental disorder is more than the absence of mental disorder Mental health of an individual is shaped by social and financial circumstances, adverse childhood experiences, biological factors and underlying medical conditions. The present study aims to determine the effectiveness of Learning Skills in enhancing mental health among adolescents. Mental health disorders impair academic, family and vocational life among adolescents. Once it is



identified at an early stage, adolescents can be helped to overcome mental health disorders such as depression, anxiety and stress to promote mental health and psychological wellbeing. Another objective is to find out the gender differences, if any between boys and girls, in overcoming the ill effects of depression, anxiety and stress after the intervention. Adolescents are exposed to DASS 21 to assess the level of depression, anxiety and stress symptoms. 120 adolescent students with mild depression, anxiety and stress symptoms are randomly assigned to two groups such as the control and experimental group, 60 adolescent students in each group, 30 boys and 30 girls with mild depression, anxiety and stress symptoms, constitute as a sample for the study. The Experimental group of adolescent students are exposed to Life Skills training for three months. Results show that there is an extremely significant difference (p>.0001) existing in the performance. Experimental group adolescent students are faster than the control group in overcoming the ill-effects of depression, anxiety and stress symptoms after the intervention. Experimental adolescent girls are better than the control boys in overcoming the ill effects of depression, anxiety and stress symptoms after intervention. Life skills training is less time-consuming, more economical and one of the best techniques of overcoming depression, anxiety and stress symptoms, promoting mental health and psychological well-being among adolescents.

KEYWORDS: DASS 21, depression, anxiety and stress symptoms, mental health and psychological wellbeing, adolescents.

INTRODUCTION:

Life is not a bed of roses for many individuals. They have to come across lot of hurdles and problems to reach the present state. These hurdles are nothing but stress. Stress is conceived as pressure from the environment, then as a strain within the individual. Stress is emanating from interactions between the situation and the individual. Stress is the psychological and physical state that results when the resources of the individual are not sufficient to cope with the demands and pressures

of day-to-day life events. An Individual can withstand the stresses. Stress leads to anxiety and depression.

"A healthy mind rests only in a healthy body". Man's happiness in life depends upon good health, vigor and vitality. Without health is misery - a virtual death. "If wealth is lost nothing is lost. If health is lost, something is lost. If the character is lost, everything is lost. "A stitch in time saves lives" is true for all times and for human beings in particular. Sometimes petty ailments if neglected can cause a lot of pain and damage to the body. It is, therefore, our primary duty to give utmost importance to our health, which alone is our real wealth. Mental Health is the fundamental condition of happiness and contentment. Health, happiness and peace of mind are those assets and treasures that cannot be purchased. To a sick person, body becomes a burdensome prison. A healthy person can meet the struggles, dangers and difficulties of life bravely. Life is a struggle for existence; in the world, there is survival of the fittest. Healthy persons with courage, stamina, vigor and vitality can be successful in the battle of life. It is a great delight to meet a person, who is physically fit, mentally sound and morally high (Kaul, 1986). The importance of health can be gauged from the fact that it is the foundation that enables an individual to live most and serve best. Health is that state of well-being that enriches a person's life. The importance of health is emphasized in the words of Sri Ramakrishna: "He who is soft and weak-minded like the puffed rice soaked in milk, is good for nothing. He cannot achieve anything great. But the strong and virile one is heroic. He is the accomplisher of everything in life." This saying of Ramakrishna heightens the fact that an individual cannot perform any work efficiently if he is not healthy.

Mental health is a state of mental well-being that enables individuals to cope with the stresses of life, realise their abilities learn well work well, and contribute to their community. Signs and symptoms of mental disorder are such as withdrawing from friends, family and colleagues, avoiding activities commonly enjoyed earlier, sleeping too much or too little, eating too much or too little, feeling hopelessness, having consistently lower energy, being addicted to mood-altering substances such as alcohol and nicotine, developing negative emotions, being confused, unable to complete day-to-day activities, having persistent thought or memory reappear regularly, thinking of causing physical damage to themselves or others, hearing voices, experiencing delusions, personality disorganisation due to psychiatric problems.

Signs and symptoms of depression, anxiety and stress are Feelings of threat, Excessive worry, Tremors, twitchy and shaky nervous feelings, Tense, aching and sore muscles, Restlessness, Easy fatiguability, Sleeping difficulties, Inability to concentrate and irritability and feelings of hopelessness.

Life skills are the gateway to success and social competence. Developmental disabilities are impairments associated with Life skills. Life skills Training is a type of behaviour that works to help children to improve their physical, mental and social skills so they can become fully competent in life. Life skills Training is predominantly a behaviour therapy. Life skills training uses behavioral theories and techniques to communicate their feelings. Life skills training refers to expressing feelings and desires to others and communicating interests.

Psychologists conduct psychodiagnostics to assess mental health. Assessment includes signs and symptoms of an individual, experiences and how these symptoms impact their life. Mental health professionals use the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders and make diagnoses.

Students in schools are facing more emotional, social and behavioural problems. There has been a great concern regarding the mental well-being of the students. Anxiety is experienced by everybody in different situations. In fact, a minimum level of anxiety is always essential for the operational efficiency of the individual. It acts as a motivating force. Anxiety, among students before the examination, helps them to prepare well. Anxiety at the workplace, before a presentation, is instrumental in helping to gather data and make a lucid presentation. But when anxiety becomes overwhelming and disturbs the day-to-day life and affects the logic and reasoning abilities then it becomes a disorder, which needs to be addressed immediately. The present study is an attempt in this direction.

AIM

Aim of the present study is to find out the effectiveness of Life Skills training in overcoming depression, anxiety and stress, promoting mental health and psychological wellbeing among adolescent students

OBJECTIVES

Mental health disorders impair academic, family and vocational life among adolescents. Once it is identified at an early stage, adolescents can be helped to overcome mental health disorders such as depression, anxiety and stress, they are promoting mental health and psychological well-being. Another objective is to find out the gender differences, if any between boys and girls, in overcoming the ill effects of depression, anxiety and stress after the intervention.

HYPOTHESIS

The following hypotheses are drawn from the review of worldwide literature:

Ha: Learning Skills training is effective in overcoming the ill effects of depression symptoms, promoting mental health and psychological well-being among adolescent students

Ha: Learning Skills training is effective in overcoming the ill effects of anxiety symptoms, promoting mental health and psychological well-being among adolescent students

Ha: Learning Skills training is effective in overcoming the ill effects of stress symptoms, promoting mental health and psychological well-being among adolescent students

Ha: Males are better than females in overcoming the ill effects of depression symptoms, promoting mental health and psychological well-being among adolescent students through intervention

Ha: Males are better than females in overcoming the ill effects of anxiety symptoms, promoting mental health and psychological well-being among adolescent students through intervention

Ha: Males are better than females in overcoming the ill effects of stress symptoms, promoting mental health and psychological well-being among adolescent students through intervention

TOOL FOR TESTING

Researchers at the University of South Wales have developed DASS-21 to assess the level of mental health problems among adolescent students. DASS-21 is a self-reporting form that measures negative emotions such as depression, anxiety and stress. DASS-21 has 21 questions, 7 questions each for assessing the level of depression, anxiety and stress. It takes 10 minutes to complete the testing (Bothesi et al., (2015), Kyriazos, et al., (2018), Lovibond & Lovibond (1995), Makara-Studzińska, et al., (2022), Medvedev (2018) and Vignola (2014).

Scoring: A standard scoring procedure is adopted

STATISTICS

Descriptive statistics for the couples on Depression, Anxiety and Stress is presented below and discussed along with results of mean, Sd and factorial Analysis of variance.

RESULTS AND DISSCUSSION

The findings of the present study are discussed on tables 2-13 and figures 2-7.

Table 1 Frequency distribution of the Sample

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SAMPLE	DEPRES	SION	ANXIETY		DEPRESSION			
	CONTROL	EXPTL	CONTROL	EXPTL	CONTROL	EXPTL		
Men	30	30	30	30	30	30		
Women	30	30	30	30	30	30		

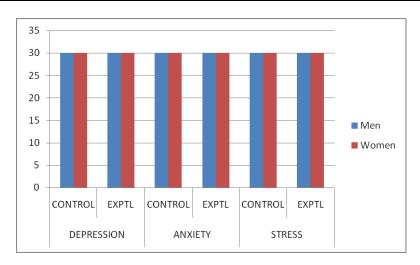


Figure 1: Frequency distribution of Sample

Table 1 and Figure 1 show the Frequency distribution of the Sample. The group is made up of 60 adolescent students, thirty boys and 30 girls in the control are matched with the experimental group of 60. Thirty boys and 30 girls on the dependent variable, with symptoms of mild depression, anxiety and stress. The random sampling method is adopted for the selection of the sample.

A descriptive statistics and mixed model factorial ANOVA are used to analyse differences over time and between the four couples categories. For analysing the data SPSS, Version 19 is used.

DEPRESSION INTERPEATTION

Table 2
Mean DASS Depression raw scores and Sd of control (n=60) Vs. experimental group (n=60) couples over three phases of training

Test Phase	Category	Mean	Sd	Sig.
Depression	Control group	11.66	1.02	NS
Pretest	Experimental group	11.49	1.11	
Posttest	Control group	11.66	1.02*	P>0.0001
	Experimental group	1.05	0.27	
Follow-up	Control group	11.66	1.02*	P>0.0001
	Experimental group	0.69	0.91	

Table 3

ANOVA: Mean DASS Depression raw scores of control (n=60) Vs. experimental group (n=60) couples over three phases of training

Parameters	Sum of	df	Mean	F - Value	P - Value
	Square		Square		
Pretest	22.53	1	22.53	0.39	NS
	199.33	119	1.64		
Posttest	608.02	1	608.02	643.13	>.0001
	54.83	119	0.95		
Follow-up	1749.6	1	1749.6	1534.42	>.0001
	86.13	119	1.54		

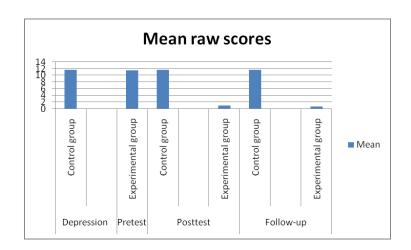


Figure 2: Mean DASS Depression raw scores of control Vs. experimental group adolescents over three phases of training

Table 2 - 3 and Figure 2 show the Mean DASS Depression raw scores of control Vs. experimental group couples over three phases of training. Calculated F - Value (0.39) is lower than the tabular value, hence, the sample selected for the study is a homogeneous sample. Both the group of couples are suffering from mild depression symptoms Posttest and follow-up analysis revealed that the experimental group is low on DASS Depression raw scores, compared to the pretest. Calculated posttest F - Value (643.13) and Follow - up F - Value (1534.42) are higher than the tabular value, hence, there is an extremely (p<.0001) significant difference (p<.0001) existing in the performance. Experimental group couples are lower (p<.0001) than the control group on DASS Depression raw scores. The experimental group is faster in overcoming depression symptoms.

With intervention, the experimental group is lower (p<.0001) than the control group's DASS Depression raw scores This may be due to regular exposure to Life skills training. They are capable of overcoming the ill effects of depression symptoms and remain emotionally well-balanced. Experimental group couples are lower (p<0.001) than the control group on depression symptoms after the intervention.

Posttest and follow-up analysis revealed that the experimental group is free from depression symptoms, compared to the pretest. With intervention, the experimental group couples are free from depression symptoms than the control group. This may be due to exposure to Life skills training by adolescents. The adolescent students are having complete control over their feelings and emotions, and are happier, mentally and psychologically well-being after the intervention.

Many adolescents feel significant changes in their mental status after the intervention. They learn to overcome disturbing minds easily. They are having the maturity and self-confidence to lead their life successfully. They are emotionally well balanced and remain psychologically well-being. They have the opportunity to use this intervention throughout their life.

The hypothesis stated, "Ha: Learning Skills training is effective in overcoming the symptoms of depression among adolescent students" is accepted.

The findings of the present study is corroborated by the research findings of Naab (2021), Singh (2020), Johnsten (2918), Sahin et al., (2018), Thapar et al., (2012), Gana, K., & Jakubowska, S. (2016), Sejbaek (2013) and Logan & King (2002). Intervention enhances Psychological well-being and promotes mental health among adolescent students.

Gender Differences

Table 4
Mean DASS Depression raw scores and Sd of control males (n=30) Vs. experimental group females (n=30) couples over three phases of training

Test Phase	Category	Mean	Sd	Sig.
Depression	Control group	11.66	1.02	NS
Pretest	Experimental group	11.49	1.11	
Posttest	Control group	11.66	1.02*	0.0001
	Experimental group	0.87	1.11	
Follow-up	Control group	11.66	1.02*	0.0001
	Experimental group	0.69	0.95	

Table 5 ANOVA : Mean DASS Depression raw scores of control boys (n=30) Vs. experimental group girls (n=30) couples over three phases of training

Parameters	Sum of	df	Mean	F - Value	P - Value
	Square		Square		
Pretest	1.2	1	1.2	0.7338	NS
		29			
Posttest	3320.98	1	3320.98	2831.19	<.0001
	136.27	29	1.15		
Follow-up	3547.53	1	3547.53	3750.28	<.0001
	100.93	29	9.46		

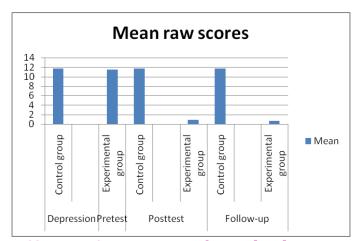


Figure 3 : Mean DASS Depression raw scores of control males Vs. experimental group females over three phases of training

Table 4 - 5 and Figure 3 show Mean DASS Depression raw scores of control males Vs. experimental group females over three phases of training. It is seen from the table that control and experimental group are suffering from symptoms of depression during pretest.. Hence, the sample selected for the study is a homogeneous sample.

Posttest and follow-up analysis reveal that the experimental group females are free from the illeffects of depression symptoms, compared to the pretest. With intervention, the experimental group is free from depression (p<.0001) than the control group. This may be due to regular exposure to Learning Skills training. Adolescent students are emotionally well-balanced and focus very well on the success of their family and occupational life. Life Skills training promotes mental health among couples.

The hypothesis stated "Ha: Females are better than the males in overcoming ill-effects of depression after intervention" is rejected. Females are faster in overcoming the ill effects of depression symptoms after intervention.

The findings of the present study is corroborated by the research study of Gana, K., & Jakubowska, S. (2016), Singh (2020), Khaled et al., 2019), Shahini (2018), Sahin et al., (2018), Lowe (2018). They have brought out the fact that intervention helps to overcome depression among adolescents. Learning Skills training enhances Psychological well-being and promotes mental health among couples.

ANXIETY INTERPRETATION

Table 6
Mean DASS Anxiety raw score and Sd of Control (n=60) Vs. The experimental group (n=60) over three phases of training

Test Phase	Category	Mean	Sd	Sig.
Anxiety	Control group	8.58	1.02	NS
Pretest	Experimental group	8.51	0.50	
Posttest	Control group	8.58	1.02*	0.0001
	Experimental group	1.80	0.53	
Follow-up	Control group	8.58	1.02*	0.0001
_	Experimental group	0.67	1.91	

Table 7
ANOVA: Mean DASS Anxiety raw scores of control (n=60) Vs. experimental group (n=60) couples over three phases of training

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Parameters	Sum of	df	Mean	F - Value	P - Value
	Square		Square		
Pretest	22.53	1	22.53	0.39	NS
	199.33	119	1.64		
Posttest	608.02	1	608.02	1243.13	<.0001
	54.83	119	0.95		
Follow-up	1749.6	1	1749.6	1534.42	<.0001
-	86.13	119	1.54		

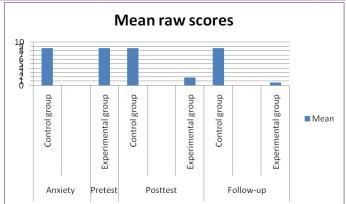


Figure 4 : Mean DASS Anxiety raw score of control Vs. experimental group over three phases of training

Table 6 - 7 and Figure 4 show the Mean anxiety raw score and Sd of control Vs. the experimental group over three phases of training. It is seen from the table that control and experimental group are showing symptoms of anxiety. Hence, the sample selected for the study is a homogeneous sample.

Posttest and follow-up analysis reveal that the experimental group is free from ill effects of anxiety, compared to the pretest. With intervention, the experimental group is free from symptoms of anxiety than the control group. This may be due to regular exposure to Learning Skills training. Adolescent students are more emotionally stable and focus very well on the success of the family ad occupational life.

The hypothesis stated, "Ha: Learning Skills training is effective in overcoming the symptoms of anxiety among couples" is accepted.

The findings of the present study is corroborated by the research study of Gana, K., & Jakubowska, S. (2016), Singh (2020), Khaled et al., 2019), Shahini (2018), Sahin et al., (2018), Lowe (2018), They have brought out the fact that intervention helps to overcome anxiety among adolescents. Learning Skills training enhances psychological well-being and promotes mental health among adolescents.

Gender Differences

Table 8
Mean DASS Anxiety raw scores and Sd of control males (n=30) Vs. experimental group females (n=30) couples over three phases of training

Test Phase	Category	Mean	Sd	Sig.
Depression	Control group	11.66	1.02	NS
Pretest	Experimental group	11.49	1.11	
Posttest	Control group	11.66	1.02*	0.0001
	Experimental group	0.87	1.11	
Follow-up	Control group	11.66	1.02*	0.0001
	Experimental group	0.69	0.95	

Table 9

ANOVA: Mean DASS Anxiety raw scores of control males (n=60) Vs. experimental group (n=60) females couples over three phases of training

Parameters	Sum of	df	Mean	F - Value	P - Value
	Square		Square		
Pretest	0.1596	1	0.1396	0.5395	NS
	29.16	29	1.22		
Posttest	1355.93	1	1355.93	1035.02	<.0001
	151.97	29	1.31		
Follow-up	1459.53	1	1459.53	1332.58	<.0001
•	127.05	29	1.40		

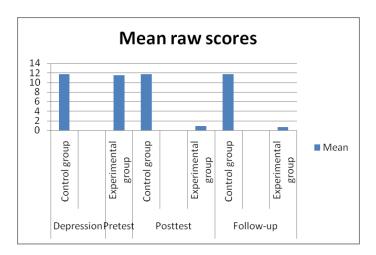


Figure 5: Mean DASS Anxiety raw scores of control males Vs. the experimental group of females over three phases of training

Table 8 - .9 and Figure 5 shows the Mean DASS Anxiety raw scores of control males Vs. the experimental group of females over three phases of training. It is seen from the table that the control and experimental groups are suffering from symptoms of anxiety during the pretest. Hence, the sample selected for the study is homogeneous.

Posttest and follow-up analysis revealed that the experimental group females are free from the ill effects of anxiety symptoms, compared to the pretest. With intervention, the experimental group is free from anxiety (p<.0001) than the control group. This may be due to regular exposure to Life skills training. Adolescents are emotionally well-balanced and focus very well on the success of their family and occupational life. Life skills training promotes mental health among adolescents.

The hypothesis stated, "Ha: Boys are better than girls in overcoming the symptoms of anxiety after intervention" is rejected. Girls are faster in overcoming the ill effects of anxiety symptoms after the intervention.

The findings of the present study are corroborated by the research study of Gana, K., & Jakubowska, S. (2016), Gana, K., & Jakubowska, S. (2016), Singh (2020), Johnsten (2018), Sahin et al., (2018) and Lowe (2018). They have brought out the fact that intervention helps to overcome anxiety among adolescents. Learning Skills training enhances psychological well-being and promotes mental health among adolescents.

STRESS INTERPRETATION

Table 10:

Mean DASS Stress raw score and Sd of Control (n=60) Vs. Experimental group (n=60) over three phases of training

Test Phase	Category	Mean	Sd	Sig.
Stress	Control group	8.58	1.02	NS
Pretest	Experimental group	8.51	0.50	
Posttest	Control group	8.58	1.02*	0.0001
	Experimental group	1.80	0.53	
Follow-up	Control group	8.58	1.02*	0.0001
_	Experimental group	0.67	10.91	

Table 11
ANOVA: Mean DASS Stress raw scores of control (n=60) Vs. experimental group (n=60) couples over three phases of training

Parameters	Sum of	df	Mean	F - Value	P - Value
	Square		Square		
Pretest	0.8475	1	0.8475	0.6961	NS
	141.22	119	1.22		
Posttest	3215.73	1	3215.73	2527.38	<.0001
	147.59	119	1.21		
Follow-up	7235.39	1	7235.39	7768.91	<.0001
-	108.03	119	0.9313		

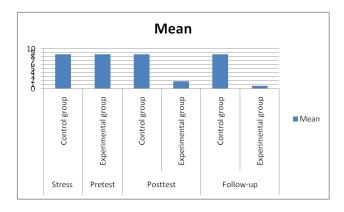


Figure 6: Mean DASS Stress raw score of Control Vs. Experimental group over three phases of training

Table 10 - 11 and Figure 6 show the Mean DASS Stress raw score and Sd of control Vs. the experimental group over three phases of training. It is seen from the table that the control and experimental groups are showing the symptoms of stress. Hence, the sample selected for the study is homogeneous.

Posttest and follow-up analysis revealed that the experimental group is free from the ill effects of stress, compared to the pretest. With intervention, the experimental group is free from symptoms of stress than the control group. This may be due to regular exposure to Learning Skills training. Adolescent students. Adolescent students are more emotionally stable and focus very well on the success of the family ad occupational life.

The hypothesis stated, "Ha: Learning Skills training is effective in overcoming the symptoms of stress among adolescents" is accepted.

The findings of the present study are corroborated by the research work of Gana & Jakubowska (2016), Singh (2020) and Shahini (2018. They have brought out the fact that intervention helps to overcome stress among adolescents. Learning Skills training enhances psychological well-being and promotes mental health among adolescents.

Gender Differences

Table 12
Mean DASS Stress raw scores and Sd of control males (n=30) Vs. experimental group females (n=30) adolescents over three phases of training

Test Phase	Category	Mean	Sd	Sig.
Depression	Control group	11.66	1.02	NS
Pretest	Experimental group	11.49	1.11	
Posttest	Control group	11.66	1.02*	0.0001
	Experimental group	0.87	1.11	
Follow-up	Control group	11.66	1.02*	0.0001
	Experimental group	0.69	0.95	

Table 13
ANOVA: Mean DASS Stress raw scores of control males (n=60) Vs. experimental group (n=60) females couples over three phases of training

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Parameters	Sum of Square	df	Mean Square	F - Value	P - Value
Pretest	392.42	1	22.53	1.324	NS
Fretest	392.42	29	22.55	1.324	IN3
Posttest	3215.73	1	3215.73	2527.20	<.0001
	147.59	29	1.21		
Follow-up	3320.98	1	3320.98	2731.19	<.0001
	126.37	29	1.17		

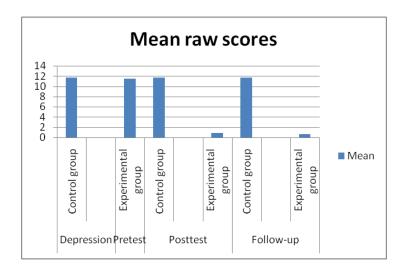


Figure 7: Mean DASS Stress raw scores of control males Vs. experimental group of females over three phases of training

Table 12 - 13 and Figure 7 show the Mean DASS Stress raw scores of control males Vs. the experimental group of females over three phases of training. It is seen from the table that the control and experimental group are suffering from symptoms of stress during the pretest. Hence, the sample selected for the study is homogeneous.

Posttest and follow-up analysis revealed that the experimental group females are free from the ill effects of stress symptoms, compared to the pretest. With intervention, the experimental group is free from stress (p<.0001) than the control group. This may be due to regular exposure to Learning Skills training. Adolescent students are emotionally well-balanced and focus very well on the success of their family and occupational life. Learning Skills training promotes mental health and psychological well-being among adolescents.

The hypothesis stated, "Ha: Boys are better than girls in overcoming the symptoms of stress through Life Skills training" is rejected. Females are faster in overcoming the ill effects of stress symptoms through Learning Skills training. Learning Skills training enhances Psychological well-being and promotes mental health among adolescent students.

REFERENCES

- ➤ 15 Infertility-Related Depression and Anxiety Symptoms. (n.d.). Retrieved November 21, 2022, from https://www.verywellfamily.com/signs-infertility-has-hijacked-your-life-1960006.
- ▶ Bottesi, G., Ghisi, M., Altoè, G., Conforti, E., Melli, G., & Sica, C. (2015). The Italian version of the Depression Anxiety Stress Scales-21: Factor structure and psychometric properties on community and clinical samples. *Comprehensive Psychiatry*, 60, 170–181.
- ➤ DASS Publications. (n.d.). Retrieved November 20, 2022. http://www2.psy.unsw.edu. au/groups/dass/pub.htm.
- ➤ Doyle, M., & Carballedo, A. (2014). Infertility and mental health. *Advances in Psychiatric Treatment*, *20*(5), pp. 297–303.
- Gdańska, P., Drozdowicz-Jastrzębska, E., Grzechocińska, B., Radziwon-Zaleska, M., Węgrzyn, P., & Wielgoś, M. (2017). Anxiety and depression in women undergoing infertility treatment. *Ginekologia Polska*, 88(2): pp. 109–112.
- ➤ Johnstone, KM, Kemps E, Chen J (2018). A meta-analysis of universal school-based prevention programs for anxiety and depression in children. *Clin Child Fam Psychol Rev.* 21(4): pp.466-81
- ➤ Khaled Badpa & Mahmood Ali ArabShirayid (2019). Effect of mindfulness based on Cognitive behavioural therapy focus on anger management regulating anxious thoughts among male students. Journal of Research & health. 9(3): pp. 220 226
- ➤ Kyriazos, T. A., Stalikas, A., Prassa, K., & Yotsidi, V. (2018). Can the Depression Anxiety Stress Scales Short Be Shorter? Factor Structure and Measurement Invariance of DASS-21 and DASS-9 in a Greek, Non-Clinical Sample. *Psychology*, 09(05): pp. 1095–1127.
- Levine, H. (n.d.). *Can Stress Affect Your Ability to Conceive?* Web MD. Retrieved November 21, 2022, from https://www.webmd.com/baby/features/infertility-stress
- ➤ Logan, DE., & King, (2002). Parental identification of depression and mental health service use among depressed adolescents. *J Am Acad Child Adolesc Psychiatry* 41: pp. 296-304.
- Lovibond, P. F., & Lovibond, S. H. (1995). The structure of negative emotional states: Comparison of the Depression Anxiety Stress Scales (DASS) with the Beck Depression and Anxiety Inventories. *Behaviour Research and Therapy.* 33(3): pp. 335–343.
- ➤ Lowe SR, Tineo P, Young MN (2018). Perceived discrimination and major depression and generalized anxiety symptoms: in muslim American college students. *J Relig Health.* 9: pp. 1-10.
- Makara-Studzińska, M., Tyburski, E., Załuski, M., Adamczyk, K., Mesterhazy, J., & Mesterhazy, A. (2022). Confirmatory Factor Analysis of Three Versions of the Depression Anxiety Stress Scale (DASS-42, DASS-21, and DASS-12) in Polish Adults. *Frontiers in Psychiatry*, 12, 770532. https://doi.org/10.3389/fpsyt.2021.770532
- ➤ Matthiesen, S. M. S., Frederiksen, Y., Ingerslev, H. J., & Zachariae, R. (2011). Stress, distress and outcome of assisted reproductive technology (ART): A meta-analysis. *Human Reproduction*. 26(10): pp. 2763–2776.
- Medvedev, O. N., Krägeloh, C. U., Titkova, E. A., & Siegert, R. J. (2018). Rasch analysis and ordinal-to-interval conversion tables for the Depression, Anxiety and Stress Scale. *Journal of Health Psychology*. https://doi.org/10.1177/135910531875526.

Journal for all Subjects: www.lbp.world

- ➤ Naab, F., Brown, R., & Ward, E. C. (2021). Culturally adapted depression intervention to manage depression among women with infertility in Ghana. *Journal of Health Psychology.* 26(7): pp. 949–961.
- ➤ Peterson, B., Boivin, J., Norré, J., Smith, C., Thorn, P., & Wischmann, T. (2012). An introduction to infertility counseling: A guide for mental health and medical professionals. *Journal of Assisted Reproduction and Genetics*. 29(3): pp. 243–248.
- > Psychiatry.org Infertility: The Impact of Stress and Mental Health. (n.d.). Retrieved November 22, 2022, from https://www.psychiatry.org:443/news-room/apa-blogs/infertility-the-impact-of-stress-and-mental-health
- ➤ Purewal, S., Chapman, S. C. E., & van den Akker, O. B. A. (2018). Depression and state anxiety scores during assisted reproductive treatment are associated with outcome: A meta-analysis. *Reproductive BioMedicine Online*. 36(6): pp. 646–657.
- ➤ Rooney, K. L., & Domar, A. D. (2018). The relationship between stress and infertility. *Dialogues in Clinical Neuroscience*. 20(1): pp. 41–47.
- Sahin N, Kasap B, Kirli U, Yeniceri N, Topal, Y. Assessment of anxiety-depression levels and perceptions of quality of life in adolescents with dysmenorrhea. *Reprod Health.* 15(1): pp.13.
- ➤ Shahini M, Shala M, Xhylani P, Gashi S, Borinca I & Erfurth A (2018). Challenging predictions between affective temperaments, depression and anxiety in a Kosovo student community sample. *Int J Psychiatry Clin.* 22(4): pp.282-88
- ➤ Simionescu, G., Doroftei, B., Maftei, R., Obreja, B.-E., Anton, E., Grab, D., Ilea, C., & Anton, C. (2021). The complex relationship between infertility and psychological distress (Review). *Experimental and Therapeutic Medicine*. 21(4): pp. 1–1.
- ➤ Singh, K., Shashi, K., Rajshee, K., Sinha, S., & Bharti, G. (2020). Assessment of depression, anxiety and stress among Indian infertile couples in a tertiary health care centre in Bihar. *International Journal of Reproduction, Contraception, Obstetrics and Gynecology.* 9(2): pp. 659.
- > Sejbaek, C. S., Hageman, I., Pinborg, A., Hougaard, C. O., & Schmidt, L. (2013). Incidence of depression and influence of depression on the number of treatment cycles and births in a national cohort of 42 880 women treated with ART. *Human Reproduction*. 28(4): pp. 1100–1109.
- ➤ Thapar A, Collishaw S, Pine DS & Thapar AK (2012). Depression in adolescence. *Lancet.* 379: pp. 1056-67.
- ➤ Vignola, R. C. B., & Tucci, A. M. (2014). Adaptation and validation of the depression, anxiety and stress scale (DASS) to Brazilian Portuguese. *Journal of Affective Disorders*. 155: pp. 104–109.
- ➤ Wilcox, D & Dowrick, PW (1992). Anger management with adolescents. *Residential treatment for children and youth*. 9: pp. 29 39