

Relationship Between Stress And Mental Health

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ABSTRACT

Siblings of individuals with neurodevelopmental conditions (NDCs) are a minority population at higher genetic and environmental risk of poorer neurocognitive and psychosocial outcomes compared to siblings of individuals without NDCs. Depressive symptoms were detected in almost one in five older adults. High perceived stress is associated with psychological and academic difficulties among college students. Student status was significantly associated with higher levels of perceived stress in almost all life domains.

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BACKGROUD

The first onset of common mental health disorders, including depressive and anxiety disorders, substance use disorders, or eating disorders typically occurs between 17 and 25 years of age. High perceived stress is associated with psychological and academic difficulties among college students. Eight student status common sources of stress (i.e., financial, health, love life, relationship with family, relationship with people at work/ school, the health of loved ones, other problems of loved ones and life in general). Student status was significantly associated with higher levels of perceived stress in almost all life domains.

Siblings of individuals with neurodevelopmental conditions (NDCs) are a minority population at higher genetic and environmental risk of poorer psychosocial functioning, higher incidence of neuropsychiatric diagnoses (e.g. bipolar disorder, schizophrenia), executive functioning (EF) difficulties, and elevated co-occurring conditions, compared to siblings of individuals without NDCs. This risk is partially conferred via shared genetic liability, and is in part attributable to environmental interactions and complex dynamic stressors influencing both sibling and family wellbeing. These unique family stressors may include behavioural problems of the child with the NDC, lack of parental availability, lack of access to services and increased sibling caregiving roles, among others. Sibling mental health may be NDC-specific or indeed severity specific yet there are some commonalities in terms of family and individual experiences across NDCs. There is, however, substantial variability in individual experiences.

Depressive symptoms were detected in 19.5% of the 1936 study participants, while 11.3% of both people with MCI and dementia had moderate-to-severe depressive symptoms. Since depressive symptoms were detected in almost one in five older adults, healthcare professionals should safeguard the timely detection and effective treatment of such symptoms and the post-diagnostic care of older adults with depression. Depressive symptoms are present in approximately 20% of older adults. More than 10% of older individuals with dementia or mild cognitive impairment report moderate-to-severe depressive symptoms.

PURPOSE OF EXPERIMENT

The aim is to determine the relationship between stress and mental health which is associated with daily life at various ages.

EXPERIMENT METHODS

Study design and data collection procedure, measures Perceived stress, control variables Anxiety and depression. The study was based on the randomly selected cohort of the Hellenic Longitudinal Investigation of Aging and Diet (HELIAD). Depressive symptoms were assessed with the 15-item version of the Geriatric Depression Scale. Participants also received a comprehensive neuropsychological assessment, while the clinical diagnoses of dementia and mild cognitive impairment were established according to international diagnostic criteria. Statistical analyses relied on comparison tests and a logistic (proportional odds) ordinal regression model. Measured over a 15-month interval between 2021 and 2022, the present prospective follow-up study is the first Bayesian examination of the unique relationships between self-reported modifiable individual-level risk, resilience, and neuropsychiatric variables amongst siblings of persons with ($n = 134$) and without ($n = 143$) NDCs (mean age 22.42, range 9–38 years, 75.81% female, 79.78% White Caucasian).

RESULT AND DISCUSSION

Sample characteristics and descriptive statistics of sources of stress, symptoms of depression and anxiety characteristics. The full sample consisted of 2,196 students with the age ranging from 18 to 36. Fifty-five percent of the weighted sample were female students. International and domestic students did not significantly differ in terms of age, gender and education level. Domestic students were significantly more likely to be first-generation students than international students. Sociodemographic characteristics of sources of stress on average international students reported significantly higher levels of perceived stress compared to domestic students in all domains except for stress related to health.

The NDC group maintained elevated rates of self-reported mental health diagnoses at follow-up (effect size $\delta -0.57$), with greater risk and fewer resilience variables than controls (δ ranging 0.50–1.07). The NDC group demonstrated

group-level worsening of depression ($\delta -0.32$). At the participant level, NDC siblings had statistically reliable declines in executive functioning and self-regulation (anxiety, empathy, attention, cognitive reappraisal) compared to the controls. Baseline self-reported sleep difficulties strongly predicted both depression and anxiety at follow-up for NDC siblings. Life events had minimal impact on mental health outcomes.

Depressive symptoms were detected in 19.5% of the 1936 study participants, while 11.3% of both people with MCI and dementia had moderate-to-severe depressive symptoms. The regression model revealed that older adults with more severe depressive symptoms were more likely female, cognitively impaired, less educated, were treated with psychotropic medication and lived in Attica versus Thessaly.

CONCLUSIONS

Since depressive symptoms were detected in almost one in five older adults, healthcare professionals should safeguard the timely detection and effective treatment of such symptoms and the post-diagnostic care of older adults with depression. Findings suggest the clinical utility of interventions for NDC siblings could be improved with a multi-modal approach and monitoring and targeting changes in transdiagnostic risk factors contributing to poorer mental health. NDC siblings had statistically reliable declines in executive functioning and self-regulation (anxiety, empathy, attention, cognitive reappraisal) compared to the controls. Baseline self-reported sleep difficulties strongly predicted both depression and anxiety at follow-up for NDC siblings. Life events had minimal impact on mental health outcomes.

College students may differ according to sources of stress. This study shows that International students experience high levels of stress in several major life domains. More studies investigating the large variety of stress sources, including cultural differences or academic difficulties, and longitudinal studies

are needed to provide the most accurate psychological interventions for subgroups of college students.

SUGGESTION

I hope people realize the importance of mental health in everyday life

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