

## Exploring Anxiety in Individuals Aged 15-30: The Role of Academic and Professional Stressors and Evidence – Based Intervention.

Vasundhra Chatta<sup>1</sup>, Mansi Gupta<sup>2</sup>, Vikas<sup>3</sup>, Puja Sarmah<sup>4</sup>, Gopal<sup>5</sup>, Shiv Shankar Tiwari<sup>6</sup>

<sup>1,2</sup>Master's Student, Public Health, Uttarakhand College of Health Sciences, Uttarakhand University, Dehradun, India

<sup>3,4</sup>Master's Student, Hospital Administration, Uttarakhand College of Health Sciences, Uttarakhand University, Dehradun, India

<sup>5,6</sup>Assistant Professor, Uttarakhand College of Health Sciences, Uttarakhand University, Dehradun, India

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### ABSTRACT

**BACKGROUND:** Anxiety is the normal reaction to stress (Cabrera, V. (2020)). According to the National Institute of Mental Health, approximately 31.9% of adolescents aged 13-18 and 25.8% of young adults aged 18-29 experience an anxiety at some point in their lives. This paper aims to investigate the specific academic, professional stressors contributing to anxiety in individuals aged 15-30, and to analyze the effectiveness of various evidence- based interventions.

**RESEARCH GAP:** There are several key research gaps in the field of anxiety and its management. One major gap is the lack of personalized treatment approaches that take into account individual differences in genetics, environment, and psychological factors (Hofmann et al., 2012). Additionally, there is limited research on the long- term efficacy and safety of existing therapies, such as medications and cognitive behavioral therapy (CBT). There is gap in research focusing on understudied populations, such as children, the elderly, and minority groups, where anxiety manifests differently and may require tailored interventions.

**OBJECTIVE:** (1) to determine the prevalence of anxiety for individuals aged 15- 30 (2) to determine academic and professional stressors contributing to anxiety (3) to determine the interventions related with anxiety.

**METHODS:** This was a survey-based study conducted on individuals aged 15-30 years to find the prevalence of anxiety and its associations with interventions for treating. A questionnaire disseminated in the form of a survey on mobiles to individuals aged 15–30 years living in different states across India.

**RESULTS:** This study highlights about 48.6% have moderate anxiety, 35.7% have mild anxiety and 15.7% have severe anxiety. On the other hand, 12.9% are extremely anxious for their placements and just 2.9% are less anxious about their jobs. There is various coping strategy to manage anxiety, which includes talking to family and friends, meditation, professional help, listening to music, doing exercises, sleeping and main try to face the problems.

**CONCLUSION:** Anxiety among individuals aged 15 -30 is a growing concern, driven by a range of academic and professional stressors. Effective interventions, such as cognitive- behavioral therapy, mindfulness practices and peer support system, offer significant relief and help individuals build resilience against stress..

**Keywords:** *Mental health, Anxiety, Prevalence, Stressors, and Evidence- based interventions..*

### 1. INTRODUCTION

Mental health is a state of mental well- being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community (World Health Organization, n.d.). It has an impact on people's thoughts, feelings, and behaviors as well as their capacity to manage stress, interact with others, and make decisions. Strong mental health is vital for fulfilling life, regardless of age. Common mental health issues include anxiety, depression, and stress disorders, which can affect daily life if not managed. This study aims to investigate the incidence of anxiety and explore methods for its management.

**BRIEF OUTLINE OF THE STUDY:-**The focus of this study was to understand the prevalence as well as interventions of anxiety, which is a normal reaction to stress. The focus of our attention will be on the handling anxiety.

## 1.1 ANXIETY:

Anxiety is the normal reaction to stress (Cabrera, V. (2020)). Anxiety characterized by muscle tightness, behaviors that are avoidance- oriented and it represents anticipation of future concern. According to the National Institute of Mental Health, approximately 31.9% of adolescents aged 13-18 and 25.8% of young adults aged 18-29 experience an anxiety at some point in their lives. This paper aims to investigate the specific academic, professional stressors contributing to anxiety in individuals aged 15-30, and to analyze the effectiveness of various evidence- based interventions.

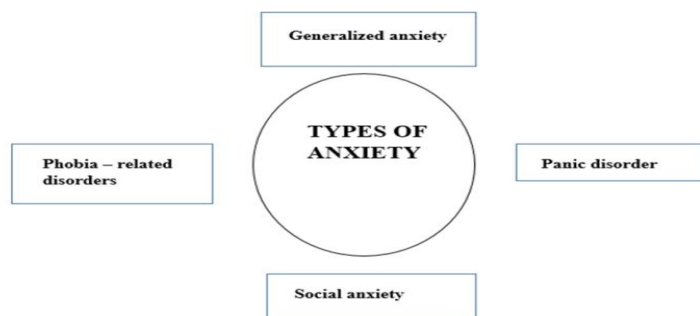
There are several anxiety disorders such as generalized anxiety disorder, panic disorder, social anxiety disorder, and numerous phobia- related disorders. (National Institute of Mental Health, n.d.)

**Generalized anxiety:** In general, a person with a generalized anxiety disorder has dysthymia with a negative connotation, anxiety, and restlessness, which can hinder effective daily living.

**Panic disorder:** Sudden panic episodes frequently arise in individuals with panic disorder, usually without any forewarning. Panic attacks are short, abrupt, unprovoked episodes characterized by frightening, uncomfortable, or loss of control sensations, regardless of any identifiable provoke or threats.

**Social anxiety:** Social anxiety is a profound fear of being the focus of attention and judgment by other people. The fear of social anxiety people has can be either very strong. It may also feel to them that they have no control over the fear.

**Phobia – related disorders:** A phobia is irrational fear or aversion to certain objects and situations. While it is normal to be worried in some cases, the fear that phobic people experience is not appropriate to the actual risk posed by the situation or object



**Figure 1: Image indicating various types of anxiety, which includes generalized anxiety, panic disorder, social anxiety and phobia- related disorders.**

## 1.2 RESEARCH GAP

There are several key research gaps in the field of anxiety and its management. One major gap is the lack of personalized treatment approaches that take into account individual differences in genetics, environment, and psychological factors. Additionally, there is limited research on the long- term efficacy and safety of existing therapies, such as medications and cognitive behavioral therapy (CBT). There is a gap in research focusing on understudied populations, such as children, the elderly, and minority groups, where anxiety manifests differently and may require tailored interventions.

## 1.3 PURPOSE OF THE STUDY:

This study aimed to assess the prevalence of anxiety among individuals aged 15 to 30 and identify evidence- based interventions addressing the condition. Additionally, it sought to explore the factors contributing to anxiety in this age group, with a specific focus on the effects of academic and professional stressors.

## 1.4 OBJECTIVES:

To determine the prevalence of anxiety for individuals aged 15- 30

To determine academic and professional stressors contributing to anxiety

To determine the interventions related with anxiety.

## 2. REVIEW OF LITERATURE:

### 2.1 ANXIETY:

Anxiety is a normal reaction to stress (Cabrera, V. (2020)). Anxiety is characterized by tense muscles and avoidance behavior,

and it is the expectation of a future worry. According to the Royal College of psychiatrists, approximately one in ten people experience anxiety disorders, such as panic disorder, post-traumatic stress disorder, and social anxiety disorder. Anxiety disorders often manifest with both physical and psychological symptoms such as rapid heartbeat, sweating, dizziness, and an overwhelming sense of dread.

### 2.1.1 CAUSE:

Anxiety is a common psychiatric disorder influenced by the complex interaction of biological, environmental and psychological components. Genetic predisposition, coupled with imbalance in neurotransmitters, can significantly increase susceptibility to anxiety disorders. Furthermore, traumatic experiences, negative childhood environments, and substance abuse can serve as potent triggers or exacerbates of anxiety symptoms. Psychological factors, such as negative thought patterns and avoidance behaviors, can also contribute to the development and maintenance of anxiety.

### 2.1.2 SYMPTOMS:

Anxiety can manifest as psychological, social, or bodily symptoms. The mental symptoms of anxiety can include worry, fear, tension, irritability, trouble concentrating, sweating, nausea, trembling, trouble sleeping, chest tightness or pain and many more. (Royal College of Psychiatrists, n.d.)



Figure 2: Anxiety symptoms.

### 2.1.3 DIAGNOSIS:

The diagnosis of anxiety disorders typically involves a comprehensive assessment by mental health professionals. This process often includes a detailed interview to explore the patient's symptoms, history, and family background. The clinician will assess the severity, duration, and impact of the anxiety symptoms on the individual's daily life. In some cases, standardized assessment tools such as questionnaire or rating scales, may be used to measure the severity of anxiety symptoms and rule out other potential causes. While there is no single definitive test for anxiety disorder, a combination of clinical interview, self-report measures, and, in certain cases, physical examination or medical tests can aid in the diagnosis. It is essential to note that accurate diagnosis is crucial for determining the most appropriate course of treatment (Hofmann et al., 2012).

### PREVALENCE OF ANXIETY:

Anxiety is a normal emotional response to stress, but it becomes overwhelming or persistent; it can develop into an anxiety disorder. According to the National Institute of Mental Health, approximately 31.9% of adolescents aged 13-18 and 25.8% of young adults aged 18-29 experience an anxiety at some point in their lives. Various studies indicate that this age group, particularly young adults transitioning through critical life stages such as education, career, and personal development, is especially vulnerable to anxiety disorders. Factors such as academic pressure, social media influence, economic instability, and uncertainty about future prospects contribute to heightened levels of anxiety. There are also different social relationship and identity formation related stressors faced by the young adults that add more to the existing anxiety symptoms. Moreover, the COVID-19 pandemic has also contributed to increases in anxiety, and studies have shown a rise in mental health problems in young people impacted by isolation, health concerns, and interruptions of their routine. In order to address the widespread nature of anxiety in this population, a multidimensional approach must be used, consisting of factors that incorporate early intervention, mental health services, and whole of society effort to minimize stigma associated with mental illness (National Institute of Mental Health, n.d.).

### ANXIETY IN YOUNG ADULTS:

As is known to all young adulthood is development stage, and the rate of anxiety is rising steadily. This mental health condition causes persistent, disruptive anxiety symptoms that affect day-to-day life. It can cause rapid heartbeat and sweating (symptoms of stress like uncontrollable trembling or shaking) even with no reason such as intense feelings of worry for hours most days this week without any logical explanation why fear may come over you towards certain places people things time etc. and more!

While anxiety is a natural human emotion, when it becomes excessive or interferes with daily life, it can significantly affect a young adult's well-being. Factors contributing to anxiety in this age group include academic pressures, career uncertainty, relationship challenges, societal expectations, and the pervasive influence of social media. Addressing anxiety in young adults requires a multifaceted approach, involving interventions such as therapy, stress management techniques, and support systems, to help individuals develop healthy coping mechanisms and lead fulfilling lives.

#### **SOURCES OF ANXIETY IN YOUNG ADULTS:**

##### ***ACADEMIC STRESSORS:***

Academic pressures frequently contribute to the rising levels of anxiety among young adults. The demands of high school, college, and graduate programs create environments that foster high expectations, competitiveness, and uncertainty. Academic performance standardized testing, and the pressure to secure scholarships or financial aid exacerbate this stress. Several studies have demonstrated a clear association between academic stress and anxiety, noting that students frequently report feelings of inadequacy, fear of failure, and the overwhelming need to succeed.

Academic workload, deadlines, and balancing studies with extracurricular activities also contribute to chronic stress. For students in more competitive fields like medicine, law, or engineering, anxiety levels tend to be even higher. These can profound effects on their mental health, leading to generalized anxiety disorder, social anxiety, and panic disorders.

##### ***PROFESSIONAL STRESSORS:***

As young adults transition from academic life to professional careers, they face a new set of stressors that can trigger or exacerbate anxiety. The shift into the workforce often includes high expectations for performance, long work hours, and job insecurity. Young professionals, particularly those in their early careers, may experience imposter syndrome, a fear of being perceived as incompetent despite evident success.

Additionally, economic factors such as unstable job markets, rising student debt, and the increasing cost of living create an environment of uncertainty and pressure. Many young professionals feel that they are in constant competition, struggling to balance their personal lives with career advancement. These stressors have shown to contribute to anxiety, as well as related mental health conditions like burnout and depression.

##### ***EVIDENCE- BASED INTERVENTION:***

Anxiety disorders effectively treated in a number of ways. Anxiety symptoms should treat by a medical professional. Evidence- based interventions are strategies, treatment, or programs that have been scientifically tested and proven effective through research. Effectively managing anxiety in young adults involves a comprehensive strategy that tackles both the psychological and social elements that lead the stress. Here are some of the most impactful evidence- based interventions being utilized today (Khoury et al., 2015).

##### ***COGNITIVE- BEHAVIOURAL THERAPY (CBT):***

Cognitive- behavioral therapy is one of the most common and best-studied forms of psychotherapy. It combines two therapeutic approaches cognitive therapy and behavioral therapy. The specific treatment

methods employed will vary based on the illness or issue being address. However, the fundamental concept behind the therapy remains consistent our thoughts, behaviors, and the way others influence our feelings all are interconnected, and they all play a significant role in our overall wellbeing.

CBT allows individuals to better manage stress and reduce anxious responses. CBT has proven effective for both academic and professional stressors.

#### ***MINDFUL AND RELAXATION TECHNIQUES:***

Mindfulness- based interventions, such as meditation and relaxation exercises, have become increasingly popular as effective treatments for anxiety. These techniques assist individuals in remaining anchored in the present and minimizing the urge to dwell on future uncertainties or past mistakes. By emphasizing mindfulness, individuals acquire the skills to handle their anxious thoughts without letting them escalate.

#### ***PEER SUPPORT AND SOCIAL CONNECTIONS:***

Strong social support networks are critical for reducing anxiety in young adults. Peer supports groups, where individuals can share their experiences and coping strategies, have found to be highly effective in alleviating anxiety.

A major contributor to anxiety, especially among students and professionals, is social isolation, which causes feelings of disconnection from peers. Community-building interventions, like group therapy or peer mentoring programs, actively reduce loneliness and offer individuals practical support.

#### ***Summary***

This review shows that (a) prevalence on anxiety including sources of anxiety in young adults, and (b) evidence- based interventions associated with the anxiety.

Therefore, this study asks the following questions,

How many young adults with anxiety, and?

What coping strategies or interventions are there?

#### **METHODOLOGY:**

##### ***STUDY DESCRIPTION:***

This survey-based study conducted for individuals aged 15- 30 for checking prevalence for anxiety as well as interventions associated with the anxiety. The study conducted in two major steps: preparation of questionnaire, and collection of data to determine the prevalence for individual's aged 15-30 facing anxiety and to know the coping strategies.

##### ***STUDY DESIGN: Survey- based study***

##### ***STUDY AREA:***

The study conducted across multiple states in India, selected to represent a diverse range of geographic, socioeconomic and demographic backgrounds. Multiple states chosen to capture variations in factors that influence anxiety levels, such as lifestyles, access to mental health resources, and cultural differences. Data on anxiety collected through questionnaires distributed across multiple states through phones, providing a comprehensive understanding of anxiety patterns.

DATA SOURCE: Data collected through questionnaire sent on mobile phones among individuals aged 15-30 living across different states of India.

##### ***DATA COLLECTION: Data was collected using questionnaire.***

DATA ANALYSIS: Microsoft Excel used to enter the data. The reported prevalence numbers were dividing into age groups. The data displays the rate of anxiety prevalence and categorizes coping methods.

**RESULTS:**

This study results categorized into the following sections:

Part A: Preparation of Questionnaire.

Part B: Prevalence of anxiety in young adults.

Part C: Academic and Professional stressors.

Part D: coping strategies or evidence- based interventions.

**PART A****PREPARATION OF QUESTIONNAIRE:**

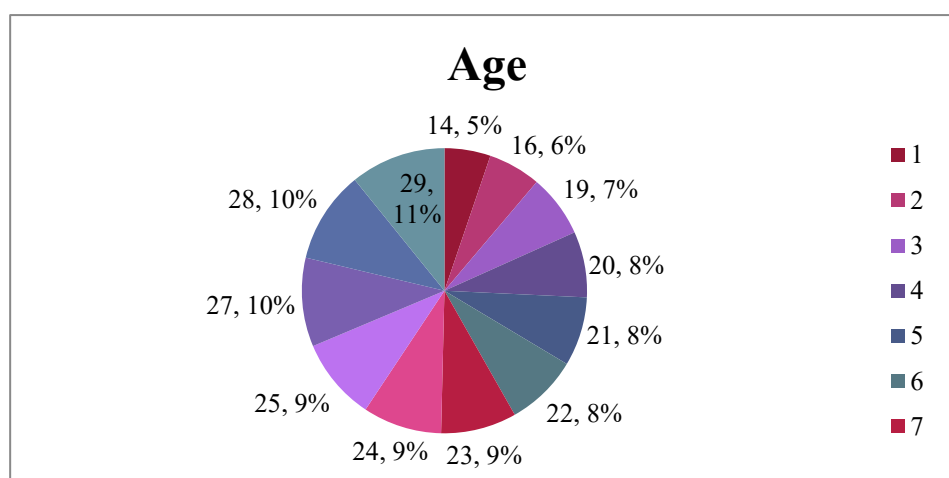
In the preparation of the questionnaire for this study, the primary objective was to gather relevant data that directly aligns with the research goals. The questionnaire designed to capture both qualitative and quantitative data to provide a comprehensive understanding of the subject. It consists of several sections, each focusing on different aspects of the research topic, ensuring a logical flow from general to more questions that are specific. The questions include a mix of open- ended and closed- ended questions to accommodate a wide range of responses. Closed- ended questions used to ensure consistency in responses, while open- ended questions provided participants with the questions provided participants with the opportunity to express opinions that are more detailed. The questionnaire developed based on a thorough literature review and existing validated tools, with modifications suit the specific context. Each question carefully designed to ensure clarity, avoid bias, and minimize respondent fatigue, ensuring high- quality data collection.

**PART B****PREVALENCE OF ANXIETY IN YOUNG ADULTS:**

This part of the study involved calculating the prevalence of anxiety in young adults. Data was collected through questionnaire sent on mobile phones among individuals aged 15-30 living across different states of India. Total responses received were 70. Of this, 88% (62) are individuals with age 15-30 (table 1).

**Table 1: The data outlines demographic details.**

Demographic details:	
Total Responses	70
Individual's age 15-30	62 (88%)



**Figure 3: Pie chart presenting age group (15-30).**



## PART C

### ACADEMIC AND PROFESSIONAL STRESSORS:

Anxiety in young adults often arises from various stressors that emerge from different aspects of their lives. One of the most common sources (table 2) is academic pressure, where high expectations and competitive environments can lead to overwhelming stress about performance and uncertainty about future career prospects. Professional stress is another source for the anxiety. As young adults transition from academic life to professional careers, they face a new set of stressors that can trigger or exacerbate anxiety. Lastly, balancing work, studies, and personal life can be significant challenge, leading to stress about time management and the fear of falling short in multiple areas of life.

Table 2: Sources of anxiety

Sources of anxiety	
1.	Academic stressors
2.	Professional stressors

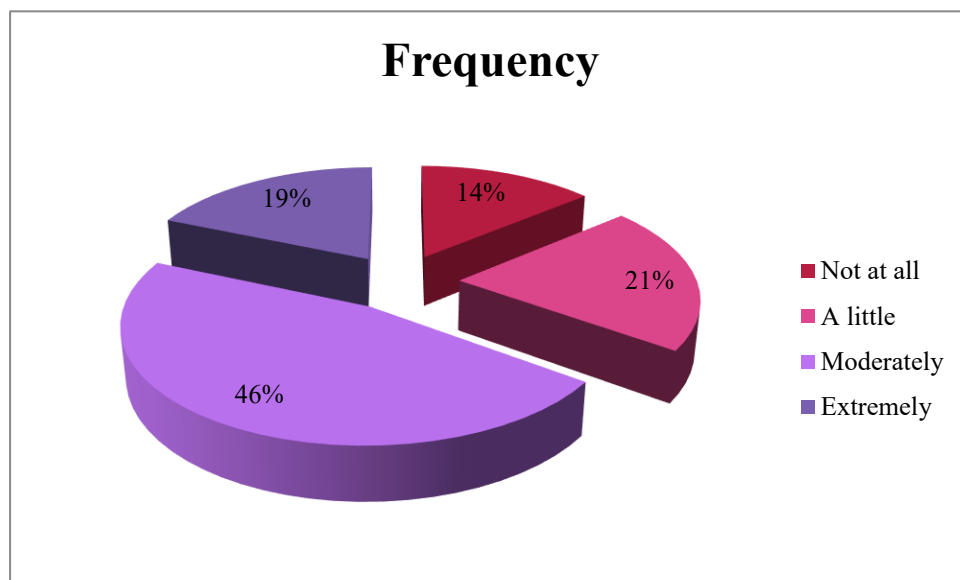


Figure 4: This pie chart presenting academic stressor about 21% is little affected, 46% is moderately affected and 19% extremely affected with exam fear and 14% have not affected.

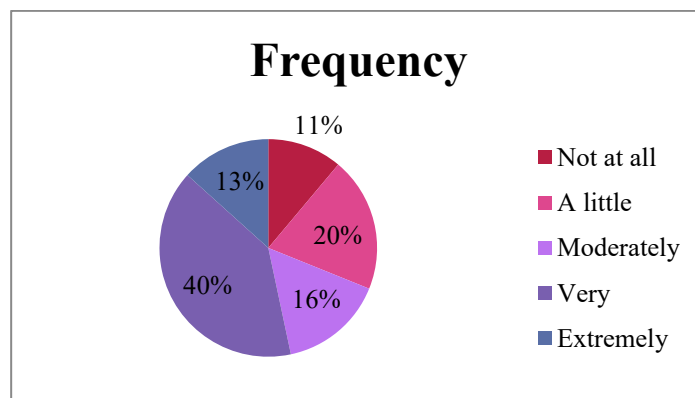
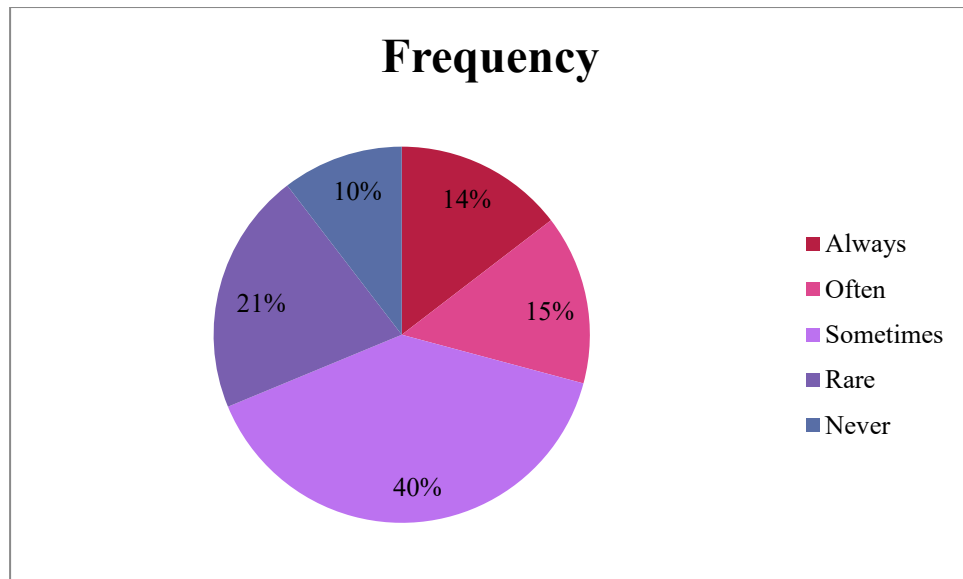
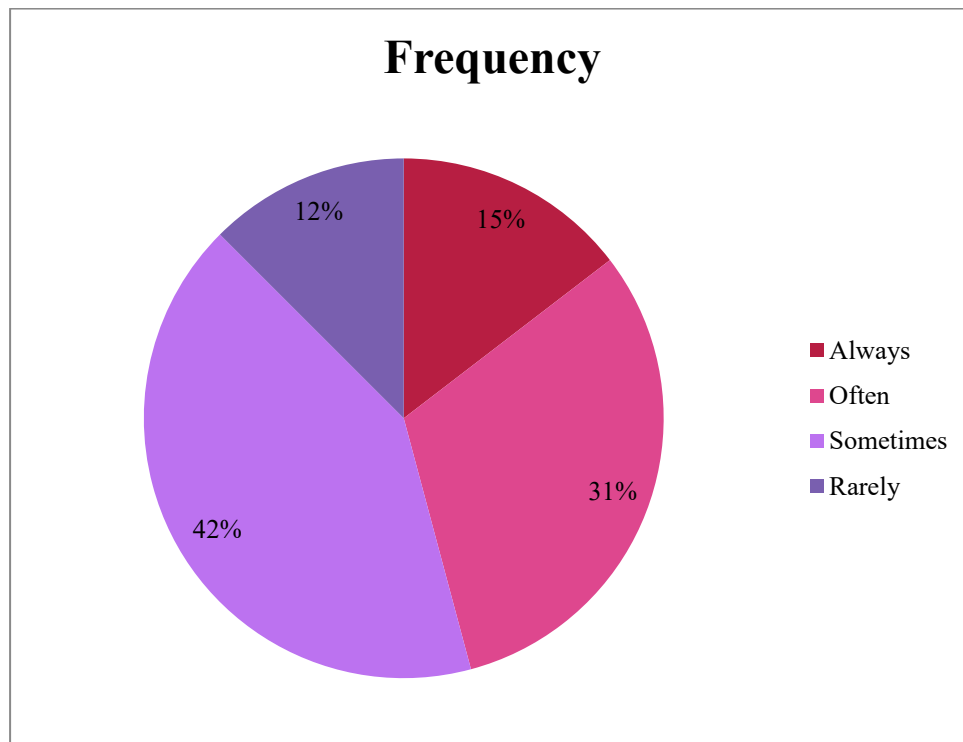


Figure 5: This pie chart represents about 40% have very high-performance pressure, 20% have little performance fear, 16% have moderate fear of performance, 13% have extremely high-performance pressure and Only 11% do not have performance pressure.

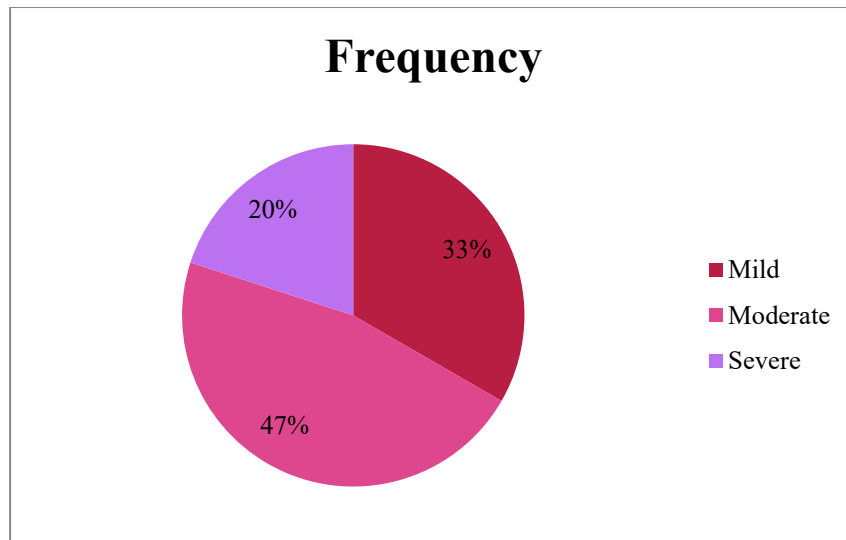


**Figure 6:** This pie chart represents about 40% sometimes have fear of failure, 21% rarely have fear of failure, 15% often have fear of failure, 14% always have fear of failure and 10% do not have any fear of failure.

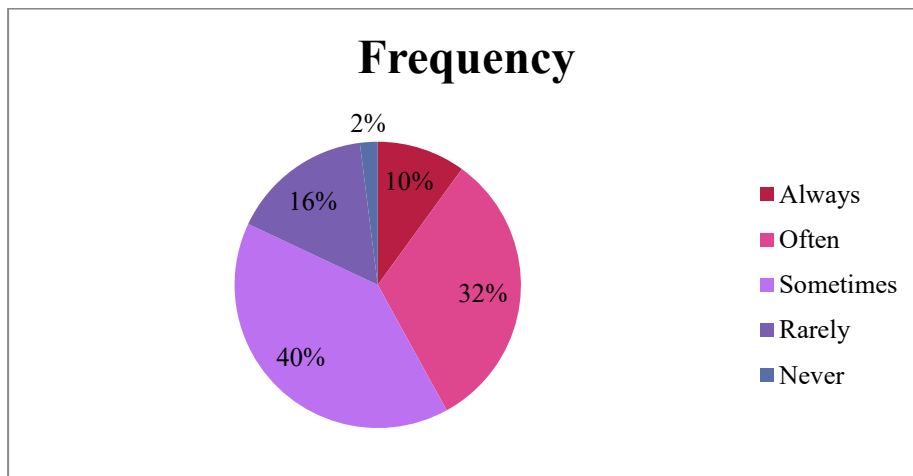


**Figure 7:** This pie chart represents about 31% get anxious often, 15% always get anxious, 42% get anxious sometimes and about 12% rarely get anxious.

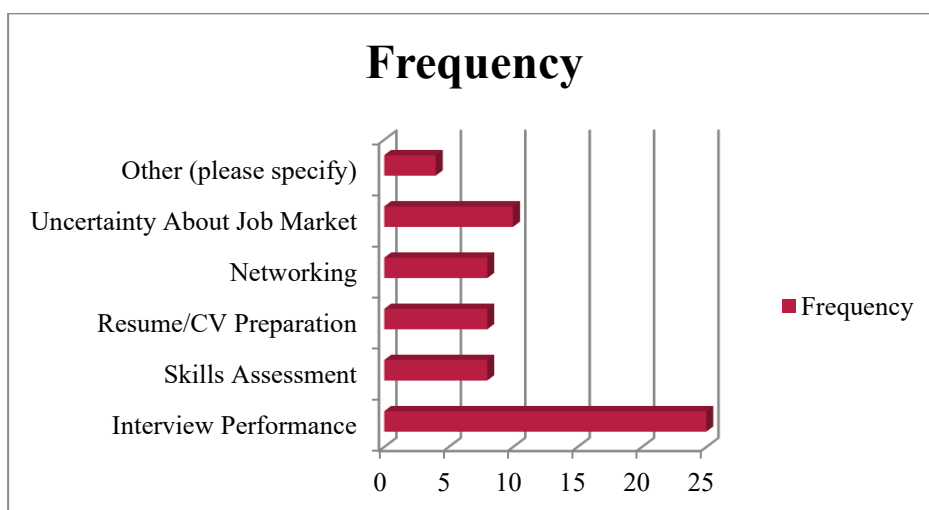




**Figure 8:** This pie chart represents about 47% have moderate anxiety, 33% have mild anxiety and about 20% have severe anxiety.



**Figure 9:** This chart represents about 10% are always anxious for their placements or jobs, 32% are often anxious, 40% are sometime anxious, 16% are rarely anxious and 2% are never anxious for their placements or jobs.



**Figure 10:** This graph represents various factors that trigger anxiety.

There are various factors triggering anxiety, which includes interview performance, resume/ CV preparation, networking, skill assessment, and sometimes-about uncertainty about job market.

## PART D

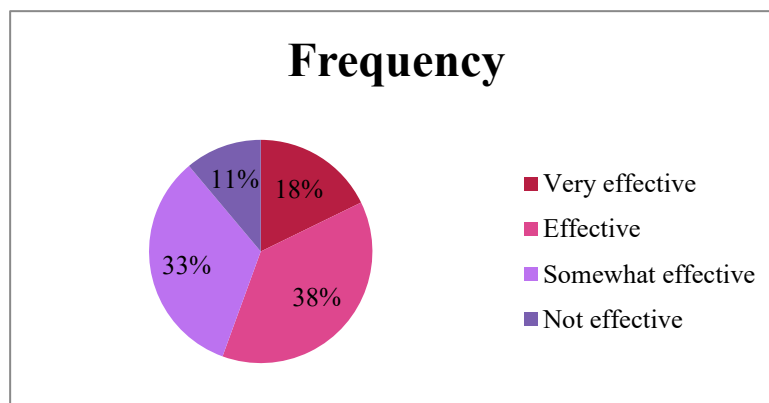
### COPING STRATEGY OR EVIDENCE- BASED INTERVENTIONS:

Anxiety disorders effectively treated in a number of ways. Various coping strategies or techniques people use to manage anxiety or stress. They can be emotional, cognitive, or behavioral actions that help individuals to handle pressure, anxiety, reduce stress and maintain emotional balance. Evidence- based interventions are strategies, treatment, or programs that have been scientifically tested and proven effective through research.

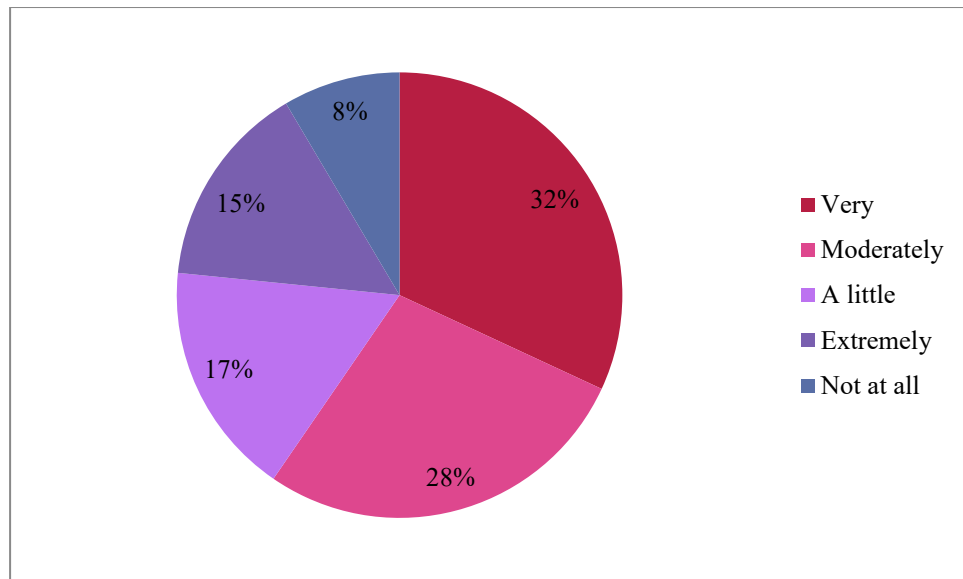
Table 3 shows strategies to cope anxiety. There were 62 individuals utilizing various coping strategies for tackle anxiety. In order to overcome anxiety, 23 people talk, 7 exercise, 4 rely on sleep, 2 walk briskly, 8 meditate or do yoga, 4 do nothing, 2 get professional help, 5 listen to music, 1 likes to travel, 2 express themselves through writing and art, 1 drink plenty of water, 1 reflects, and 2 face their issues

**Table 3: Coping strategies**

Strategies to cope anxiety	Count of individuals aged 15-30
Talking to friends and family	23
Exercises	7
Sleep	4
Brisk walking	2
Meditation and yoga	8
Do nothing	4
Therapy/ professional help	2
Listening music	5
Travel	1
Writing/ Art	2
Drinking water	1
Introspect	1
Face the problems	2
<b>TOTAL : 62</b>	



**Figure 11:** This pie chart represents how effective coping strategies are. About 33% find it somewhat effective, 38% find it effective, 18% find it very effective, and 11% find it not effective



**Figure 12: This pie chart represents about the support system like family, friends. About 32% have very high support system, 28% moderate support system, 15% have extremely high support system, 17% have little support system and 8% do not have any support system**

Thus, there is various coping strategy to manage anxiety, which includes meditation, professional help, talking to family and friends, listening to music, doing exercises, sleeping and main try to face the problems.

## 5. CONCLUSION:

Anxiety among individuals aged 15-30 is a growing concern, driven by a range of academic and professional stressors. The pressure to succeed academically and professionally, combined with economic uncertainty and personal transitions, has led to a surge in anxiety-related disorders within this age group. Effective interventions, such as cognitive-behavioral therapy, mindfulness practices, and peer support system, offer significant relief and help individuals build resilience against stress. As society continues to evolve, it is essential that educational institutions and workplaces prioritize mental health support for young adults. Providing access to evidence-based interventions can prevent the long-term consequences of anxiety and promote healthier, more productive lives for this vulnerable population (World Health Organization, n.d.)

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