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Role of Mental Health in Life Skill Education: Its Impact in the Present Scenario

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Abstract

Mental health is a necessary condition of good adjustment and vice-versa. When a person is mentally healthy, there is a little likelihood of serious maladjustment. Mental health is basically the key through which individual can enter into the chamber of happiness and wholesome adjustment. Wellness is dependent on the adequate coordination of physical and psychological health. Current new normal situation is creating a new arena in front of us and hence adjustment to such lifestyles is also a new task for everybody. Achieving proper mental health is reliant on the fulfillment and possession of some basic criteria like integration of thoughts, positive healthy feelings, development of healthy self-concept etc. Entire population is affected by this

pandemic but the nature of consequence is to some extent different for the adolescent subsample. Sudden changes in daily life styles make them more prone towards internet usage, substance abuse. Grief, depression, anxiety are now companion of their journey to existence. Life is not static, so intervention strategies and probable coping up processes are also there. Psychologists and Sociologists have suggested some probable pathways for achieving the homeostasis in the frame of mental health. Problems and remedial measures are just the opposite of the same coin, name life cycle and it is our duty to help the individual who is out of such healthy track so that at the end positive fragrance of life can be achieved by them.

Keywords: Mental Health, Adolescence, Pandemic, Coping Strategies

Introduction:

'Mental health' and 'mental illnesses are two related but distinct terms. Mental health basically originates from the term mental illness in order to reduce the stigma (Rowling *et al.* 2002) ^[25]. Ryff and Singer (1998) ^[25] mentioned that health is not only used to explain medical concepts rather it is an idealistic one that requires an explanation of positive life-being one where human being have a sense of the rationale, engulfed in valuable relationship with others, and bears a sense of self-respect and mastery. As defined in the Annual Report of World Federation for Mental Health 'mental health is not simply the nonappearance of mental disorder but it is a condition in which person lives harmoniously with him and others, adapting to, and participating in, and interchanging in social setting with the sense that he or she is achieving self-realization through his or her basic needs'. Burnman pointed out that mentally healthy person one who has a wholesome balanced personality free from inconsistency, emotional and nervous tensions, disorders and conflicts.

Mental health is a necessary condition of good adjustment and vice-versa. When a person is mentally healthy, there is a little likelihood of serious maladjustment. Thus, Scott, Nunnally and Smith (1961) ^[27] have said that mental health is the key to wholesome adjustment. According to Maslow, mental health means freedom from disabling and disturbing symptom that interferes with mental efficiency, emotional stability or peace of mind. The status of physical and subjective well-being always depends on smooth coordination of physical and mental health, but current scenario is totally diverse from our conventional concept of daily living. The changeability and ambiguity of pandemic situation is associated with lockdown, social and physical distancing and quarantine strategies. Many psychological problems like, stress, anxiety, trauma, depression, frustration have been emerged progressively. Universal psychological reactions related to pandemic Covid-19 may diverge from panic reactions to invasive feelings of hopelessness and helplessness. It is well known that effective and stimulating psychosocial environment is essential to create proper teaching-learning environment. Daily exposure to this pandemic particularly for those who have been either affected personally or affectively detached from the loved ones may occur in a

range of consequences. Reactions can be of any type like physical, emotional, behavioral and can crash the mental and substantial lives of youth throughout the country. Educational institutions are suddenly closed and students are facing abrupt changes in their social, academic and personal lives also. Situations become so critical for which they are about to think that they are not getting the full value of their education and their future will be occupied with uncertainty. Keeping into mind this notion, the present venture has made an attempt to highlight the affective and co native changes of the adolescents alongside with the coping strategies that will be beneficial for them during this pandemic situation.

Literature Review on Mental Health and Life skill Education:

Findings of Khalatbari and Aziz Zadeh [2011] showed that life skills training and coping with stress significantly increased mental health of students. Also, in comparing the effect of teaching the methods of coping with stress with Life Skills Training, it was found that the teaching of coping with stress is more effective than life skills training on depression of girl students. Michaeli Manee *et al.*, [2011] compared the effectiveness of three life skills on public health of First year students, the difference between pretest and posttest scores and difference between control and experimental groups, in the entire experimental group was statistically significant in favor of public health.

In the departments of stress management and self-consciousness, anxiety, insomnia, and in effective communication component, component of somatic symptoms in comparison with the other components was further improved. Results of mean pairwise scale showed training were effective communication skills training in all aspects of public health and the overall score that compared with other skills, had more change and improvement. The results khodabakhsh and Mansouri [2011] showed that life skills training is effective on mental health and increased mental health that these results are consistent with results from previous studies in this field about life skills training's effect on mental health skills. Results of Sabri Nazar Zadeh *et al.*, [2010] showed that there is a significant positive correlation between self-efficacy and self-esteem, mental health.

Esmkhani Akbarnejad *et al.*, [2010], examined self-efficacy and its relation to mental health and academic achievement of female students. The results showed that there is a relationship between self-efficacy and mental health and its components and the highest correlation is related to depression. Yousefi and Grossi [2009] investigate the effect of life skills training on mental health, well-being and physical symptoms and anxiety of physically disabled patients in city of Tabriz. The results of the data analysis showed that life skills training, improved mental health, anxiety and physical symptoms of the physically disabled patients.

Fouladvand *et al.*, [2009] found the results that higher levels of physical and mental health, are predicted through higher grades in social support and self-education and lower scores on academic stress. Also, the interface between social support and physical and mental health is mediated through self-efficacy and academic stress. And the relationship between academic self-efficacy and academic stress is mediated through the physical and mental health. All

relationships between the variables were statistically significant, and Model predictive variables explained 0/19% of physical and mental health variance. Najafi and Fouladchang [2007] showed that there was a significant inverse link between self-efficacy and pathological symptoms. There was a significant positive correlation between self-efficacy and mental health.

It was also observed between the two groups of boys and girls in terms of efficacy and mental health that there was no significant difference. In this study the significant relationship between self-efficacy and mental health [less pathological symptoms] was confirmed. Mir Samiee and Ebrahimi [2007] showed that the relationship between self-efficacy and mental health and relationship between social support and mental health was positive and the relationship between test anxiety and mental health are negative. It also found that there are no differences in means of self-efficacy, social support and test anxiety in both sexes. However, the average mental health of male students is significantly lower than average mental health of female students. Results of Haghghi *et al.*, [2006] showed that life skills training increase mental health and self-esteem in the experimental group compared with the control group.

Yadavari [2004] studied the life skills education impact on general health, self-esteem and self-expression female high school students in Ahvaz city. The result shows a significant increase in general health, self-esteem and assertiveness in experimental group compared to the control group. Aqajani [2002] in MA thesis investigated the effect of life skills training on mental health and locus of control of teens. The results showed that life skills training, improves mental health. But the effect of life skills training on locus of control of subjects was not significant. There is a significant positive correlation between mental health and coping styles as well as between locus of control and coping styles; but a significant positive relationship between mental health and locus of control does not exist. There is a significant correlation between level of maternal education, maternal employment and academic performance of students with mental health and coping styles. Zofman and Loritzen [2012], reported that life skills training and guidance for self-decision making to patients increases the autonomy of patients and their health. Tyuranym *et al* [2011] concluded that self-report training to people is a way to increase self-awareness that can lead to improve students' communication skills. That is why it concluded training due to increased awareness and understanding of the strengths and weaknesses of using them can help people in health growth. Leung *et al* [2010] concluded that these skills are effective in increasing mental health and physical health. Gotzman *et al.*, [2010] showed that diabetic patients have lower mental health and feelings of helplessness in them are high. Gupta and Kumar [2010] showed that self- efficacy has a significant positive relationship with mental health. RAQI *et al* [2010] concluded that self- efficacy in changing health behavior is a good predictor.

Smith *et al.*, [2003] also showed that life skills training increases personal and interpersonal skills, problem-solving and coping skills. The results Seo - Kachyng and Stephen [2004], suggest that the increased efficacy was associated with improved mental health. The study reports that among the ways to help people with anxiety and depression, is increase in efficiency and providing a social environment supportive of them. In addition, it was observed that poor

self-efficacy and loneliness are both associated with depression and anxiety. Kim [2003] in a study on high school students shows a significant relationship between self-efficacy and mental health component.

Mental Health issues among adolescents:

Adolescents are facing numerous challenges with respect to mental health. Increasing deterioration in physical health also leads to gamut of psychological consequences (Liu *et al.*, 2020) [19], ranging from anxiety, depression to disturbances in eating and sleeping etc. During this situation most of educational institutions have decided to stop classes through offline mode, as a result students experience distress and uncertainty regarding their future. Some students for whom campus is just the second home may suffer from intense feelings of frustration, anxiety or may resist with loneliness and isolation due to detachment from friends and partners. Not only that, some students also receive counseling services from educational institution that actually control their psychological upheavals, may suffer from increased amount of adjustments problems. Absence of such protective measure may increase the rate of suicidal ideation and substance use among them.

▪ **Effects of recent Covid-19**

Covid-19 has pessimistic and potentially extended effects on the psychological well-being of individuals, including symptoms of post-traumatic stress, perplexity, and antagonism (Brooks *et al.*, 2020) [6]. Daily lives without school or college are associated with lessened physical activity, inappropriate patterns of sleep and diet, more screen time (Wang *et al.*, 2020) [35]. The reciprocal interaction between brain maturation and social environment becomes in trouble which have a negative influence by inviting preliminary symptoms of psychiatric disorder during adolescence (Lamblin *et al.*, 2017) [18]. Sudden separation from friends, excessive apprehension about relatives and their own health brings a kind of insecurity within them. Experience of lockdown becomes intolerable for them. They have to withdraw themselves socially and stay at home, where as in normal times this behavior was considered as pathological one (Tajan 2015; Lamblin *et al.*, 2017) [31, 18].

▪ **Suicidality**

Traumatic events like current situation unquestionably affect most of the demographics of adolescents. Communication through online mode creates a special kind of alertness regarding behavioral fluctuation among the student's population and that is no doubt challenging for them. At this crucial moment parents have to play the supplementary role of teacher or counselor, predominantly for those who have suffered from gloominess and insecurities. In reality, it is very difficult for the parents to bear such role without knowing the adequate strategies for coping with such unusual situation and hence it results in frequent mental instabilities among adolescents, as well as higher risk for suicidality (Erbacher, 2020) [10]. Literature survey also suggests that stressful life events are another risk

factor for adolescent suicidality (Brent 1995) [5].

▪ **Addictions**

The incidence of increased addictive disorders among adolescents has also been raised (Reijneveld *et al.*, 2005) [24] during this time. In order to cope with the traumatic events adolescents are expected to take on risk-behaviors, such as alcohol or any kind of substance abuse and sexual relationships (Hagan, 2005) [16]. Primarily adolescents involve in substance abuse due to coping reasons (Gerrard, Gibbons, Houlihan, 2008; Thombs and Beck, 1994 [32]). Basically, they experience 'negative emotionality' a propensity towards affective disorders like depression, anxiety, lower adjustment to stress, which ultimately leads to solitary substance abuse within them (Creswell, Chung, Wright, 2015) [9].

▪ **Grief**

COVID-19 brings the first experience of deaths for some adolescents. This experience is shocking and associated with longer grief (Nader and Salloum, 2011) [22]. Abrupt and unforeseen parental loss may be an etiological aspect for depressive disorder for some adolescents (Gray *et al.*, 2011) [13]. Literature also suggests that poorer economic status may be negatively associated with adolescent's intra-familial grief (Stikkelbroek *et al.*, 2016) [30].

▪ **Family and Intra-family Violence**

Pandemic situation elicits a lot of new experiences in the lives of human beings, among which family detention is a significant one. Literature review suggests that due to such drastic transformation women and girls are supposedly more exposed to gender-based violence, particularly sexual violence (UNFPA, 2020) [33]. During this time, adolescent break out the watchfulness of adults and parents which actually mark their agony in customary societal surroundings.

▪ **Internet, social media and their Accessibility**

COVID-19 has created a new world of technology in front of us. Social media becomes the key catalyst within this era. It could be a constructive one in order to maintain social interaction during this time but it is also associated with harmful outcomes too. According to current survey, excessive use of internet may invite depression, anxiety, psychological distress and sleep problems (Keles *et al.*, 2020; Barry *et al.*, 2017) [17, 4]. Internet addiction is characterized by too much or feebly controlled preoccupations, urges, or behaviors concerning computer use and internet admittance that guide to destruction or suffering (Shaw and Black, 2008) [28]. The information they receive through social media are much undeviating less contextual than conventional one. In order to deal with social media adolescents are utilizing several sources and different kinds of news, but for understanding such information their maturation levels are not up to the mark and they news proper guidance for monitoring such avenues, hence results in behavioral and emotional tribulations (Murty *et al.*, 2016) [21].

▪ **Adolescents with Psychiatric Disorders facing the COVID-19 Eruption**

Insensitive effect of lockdown, terror of infection creates the situation miserable for adolescents with psychiatric disorders. Due to their poor impulse control, they are unable to tolerate the effect of lockdown (Chevance *et al.*, 2020). Adolescents with Attention-Deficit-Hyperactive-Disorder (ADHD) might face some difficulty in dealing with lockdown. Daily routine, habit pattern are totally disrupted which ultimately leads to inflexible behavior pattern, particularly for those who are suffering from pervasive developmental or spectrum disorders (American Psychiatric Association, 2013) ^[2].

▪ **Economic Crisis**

The COVID-19 pandemic is also ensuing in an economic disaster (Fernandes, 2020). Periods of economic crisis are linked with raise in suicides, depression, anxiety, and addiction disorders (Gili *et al.*, 2013; Marazziti *et al.*, 2020; Uutela, 2010; Silva *et al.*, 2020) ^[12, 20, 34, 29]. Parental emotional support and time spent with parents may conserve adolescents from potential depressing effects of an economic crisis (Gudmundsdóttir *et al.*, 2016) ^[14].

Several ways how Life Skills promotes Mental Health:

- **Identification and labeling of feeling:** It is important to be acquainted with the feelings and emotions that are most significant at the time of emergency. Without accepting or identifying the thoughts it will be difficult for anybody to cope with the crisis.
- **Effective Communication:** Self-talk is one of the major aspects that most of the individuals follow in his or her daily living. Sincere efforts are necessary to keep oneself aloof from the negative affects otherwise coping will be so far from human population.
- **Preparation of Everyday Me-time:** Work on strength-based skills for a livelihood. Keep an eye on the areas of improvement but do not let them supersede on one.
- **Avoidance of Excessive Media Exposure:** Increased screen time activity may hinder the impulse control of adolescents. Not only have that media sometimes provided misleading information. So, cross-checking of every bit of knowledge and lesser internet usage may be another way for adaptive coping during pandemic.
- **Positive Strength Recognition:** It is important for students to reappraise their past success. The way they fought with that situation helps them to build up their strength and reminds the lessons that they have learnt from their unique strengths.

Conclusion:

In recent days many psychological problems like, stress, anxiety, trauma, depression, frustration have been emerged progressively. Universal psychological reactions related to pandemic Covid-19 may diverge from panic reactions to invasive feelings of hopelessness and helplessness. It is well known that effective and stimulating psychosocial environment is essential to create proper teaching-learning environment. Daily exposure to this pandemic particularly

for those who have been either affected personally or affectively detached from the loved ones may occur in a range of consequences. Ignoring the instantaneous and long-term psychosomatic effects of the present post-pandemic would be terrible, chiefly for adolescents. Interventions need to spotlight on cultivation of resilience in adolescents by enhanced message to address their doubts and concerns, enriching routines and physical activities, and taking dealings to alleviate loneliness. Therefore, it is necessary to provide appropriate conditions for achieving the goals of education, training and ensuring the health of people in the community in different ages and strategies for providing mental health in school be conspired. Environment in which students are engaged in learning and training as all other environments that influence individual behavior, effects their mental health and behaviors. Clearly, the physical environment, including the school building conditions, light, color, health of environment affects students' mental health. It is therefore essential that in order to enhance students' mental health to provide proper physical condition, and since the majority of students daily hours are spent in the school environment, inappropriate Physical conditions such as inadequate lighting, poor heating and cooling systems, and building security is very important. In providing mental health of students, attention to mental health officials and school personnel is also important. In addition to the effects of school officials on student behavior, the relation that they have with students can be beneficial or detrimental to the mental health of students. Therefore, it is necessary to provide mental health of school officials and the selection of healthy people should be considered. Counselor is central point in school to provide mental health. Consultant by identifying factors disruptive for mental health and mental health promoting agents will try to create a healthy environment at school. In addition, role modeling by counseling can be a model for other teachers and by identifying the troubled students and helping to solve their problems and identifying other factors and using existing facilities they can improve the school' mental health. Parents needs to be concerned about their own mental health, coping strategies, and follow a replica of constructive psychological approach in order to prop up adolescents to get through this hard time.

References:

1. Advisory for the psychosocial support & mental health promotion for University/College Students. During the COVID-19 Pandemic and Beyond. https://www.education.gov.in/covid-19/assets/img/pdf/advisory_for_university_students.pdf
2. American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders (DSM-5®). American Psychiatric Pub, 2013. [https://repository.poltekkes-kaltim.ac.id/657/1/Diagnostic%20and%20statistical%20manual%20of%20mental%20disorders%20-%20DSM-5%20\(%20PDFDrive.com%20\).pdf](https://repository.poltekkes-kaltim.ac.id/657/1/Diagnostic%20and%20statistical%20manual%20of%20mental%20disorders%20-%20DSM-5%20(%20PDFDrive.com%20).pdf)
3. Andersen R. A behavioral model of families' use of health services. Research Series No. 25. Center for Health Administration Studies, University of Chicago. Chicago, 1968. <https://www.scirp.org/reference/ReferencesPapers?ReferenceID=1028772>
4. Barry CT, Sidoti CL, Briggs SM, Reiter SR, Lindsey

- RA. Adolescent social media use and mental health from adolescent and parent perspectives. *Journal of Adolescence*. 2017; 61:1-11. <https://www.sciencedirect.com/science/article/abs/pii/S0140197117301318>
5. Brent DA. Risk factors for adolescent suicide and suicidal behavior: Mental and substance abuse disorders, family environmental factors, and life stress. *Suicide & Life-Threatening Behavior*. 1995; 25(SP):52-63. Doi: <https://doi.org/10.1111/j.1943-278X.1995.tb00490.x>
 6. Brooks SK, Webster RK, Smith LE, Woodland L, Wessely S, Greenberg N, *et al.* The psychological impact of quarantine and how to reduce it: Rapid review of the evidence. *The Lancet*. 2020; 395(10227):912-920. Doi: [https://doi.org/10.1016/S0140-6736\(20\)30460-8](https://doi.org/10.1016/S0140-6736(20)30460-8)
 7. Brown RC, Witt A, Fegert JM, Keller F, Rassenhofer M, Plener PL. Psychosocial interventions for children and adolescents after man-made and natural disasters: A meta-analysis and systematic review. *Psychological Medicine*. 2017; 47(11):1893-1905. Doi: <https://doi.org/10.1017/s0033291717000496>
 8. Cobham VE, McDermott B, Haslam D, *et al.* The Role of Parents, Parenting and the Family Environment in Children's Post-Disaster Mental Health. *Curr Psychiatry Rep*. 2016; 18:53. Doi: <https://doi.org/10.1007/s11920-016-0691-4>
 9. Creswell KG, Chung T, Wright AG, Clark DB, Black JJ, Martin CS. Personality, negative affect coping, and drinking alone: A structural equation modeling approach to examine correlates of adolescent solitary drinking. *Addiction* in press, 2015. Doi: <https://doi.org/10.1111/add.12881>
 10. Erbacher TA, Singer JB, Poland S. *Suicide in schools: A practitioner's guide to multi-level prevention, assessment, intervention, and postvention*. New York: Routledge, 2020. <https://www.routledge.com/Suicide-in-Schools-A-Practitioners-Guide-to-Multi-level-Prevention-Assessment/Erbacher-Singer-Poland/p/book/9780367141707>
 11. Gerrard M, Gibbons FX, Brody GH, Murry VM, Cleveland MJ, Wills TA. A theory-based dual-focus alcohol intervention for preadolescents: The strong African American family's program. *Psychology of Addictive Behaviour*. 2006; 20:185-195. <https://psycnet.apa.org/doi/10.1037/0893-164X.20.2.185>
 12. Gili M, Roca M, Basu S, McKee M, Stuckler D. The mental health risks of economic crisis in Spain: Evidence from primary care centres, 2006 and 2010. *European Journal of Public Health*. 2013; 23(1):103-108. Doi: <https://doi.org/10.1093/eurpub/cks035>
 13. Gray LB, Weller RA, Fristad M, Weller EB. Depression in children and adolescents two months after the death of a parent. *Journal of Affective Disorders*. 2011; 135(1-3):277-283. Doi: <https://doi.org/10.1016/j.jad.2011.08.009>
 14. Gudmundsdóttir DG, Ásgeirsdóttir BB, Huppert FA, Sigfúsdóttir ID, Valdimarsdóttir UA, Hauksdóttir A. How Does the Economic Crisis Influence Adolescents' Happiness? Population-Based Surveys in Iceland in 2000–2010. *Journal of Happiness Studies*. 2016; 17(3):1219-1234. Doi: <https://doi.org/10.1007/s10902-015-9639-3>
 15. Guessoum SB, Lachal J, Radjack R, Carretier E, Minassian E, Benoit L, *et al.* June 28th. Adolescent psychiatric disorders during the COVID-19 pandemic and lockdown. *Psychiatry Research*. 2020; 291:113264. Doi: <https://doi.org/10.1016/j.psychres.2020.113264>
 16. Hagan Jr JF. American Academy of Pediatrics Committee on Psychosocial Aspects of Child and Family Health, & Task Force on Terrorism. Psychosocial implications of disaster or terrorism on children: A guide for the pediatrician. *Pediatrics*. 2005; 116(3):787-795. Doi: <https://doi.org/10.1542/peds.2005-1498>
 17. Keles B, McCrae N, Grealish A. A systematic review: The influence of social media on depression, anxiety and psychological distress in adolescents. *International Journal of Adolescence and Youth*. 2020; 25(1):79-93. Doi: <https://doi.org/10.1080/02673843.2019.1590851>
 18. Lamblin M, Murawski C, Whittle S, Fornito A. Social connectedness, mental health and the adolescent brain. *Neuroscience and Bio-behavioral Reviews*. 2017; 80:57-68. Doi: <https://doi.org/10.1016/j.neubiorev.2017.05.010>
 19. Liu N, Zhang F, Wei C, Jia Y, Shang Z, Sun L, *et al.* Prevalence and predictors of PTSS during COVID-19 outbreak in China hardest-hit areas: Gender differences matter. *Psychiatry Research*. 2020; 287:112921. Doi: <https://doi.org/10.1016/j.psychres.2020.112921>
 20. Marazziti D, Avella MT, Mucci N, Della Vecchia A, Ivaldi T, Palermo S, *et al.* Impact of economic crisis on mental health: A 10-year challenge. *CNS Spectrums*, 2020, 1-7. Doi: <https://doi.org/10.1017/s1092852920000140>
 21. Murty VP, Calabro F, Luna B. The role of experience in adolescent cognitive development: Integration of executive, memory, and mesolimbic systems. *Neuroscience and Bio-behavioral Reviews*. 2016; 70:46-58. Doi: <http://dx.doi.org/10.1016/j.neubiorev.2016.07.034>
 22. Nader K, Salloum A. Complicated Grief Reactions in Children and Adolescents. *Journ Child Adol Trauma*. 2011; 4:233-257. Doi: <https://doi.org/10.1080/19361521.2011.599358>
 23. Nuttman-Shwartz O. Behavioral Responses in Youth Exposed to Natural Disasters and Political Conflict. *Current Psychiatry Reports*. 2019; 21(6):42. Doi: <https://doi.org/10.1007/s11920-019-1030-3>
 24. Reijneveld SA, Crone MR, Schuller AA, Verhulst FC, Verloove-Vanhorick SP. The changing impact of a severe disaster on the mental health and substance misuse of adolescents: Follow-up of a controlled study. *Psychological Medicine*. 2005; 35(3):367-376. Doi: <https://doi.org/10.1017/S0033291704003575>
 25. Rowling L, Martin G, Walker L. (eds). *Mental Health Promotion and Young People: Concepts and Practice*. Roseville, NSW: McGraw-Hill Australia, 2002. Doi: <https://doi.org/10.5172/hesr.2002.11.1-2.98>
 26. Ryff CD, Singer B. The contours of positive human health. *Psychological Inquiry*. 1998; 9(1):1-28. <https://www.jstor.org/stable/1449605>
 27. Scott DJ, Nunnally JC, Smith KMW. *Popular conceptions of Mental Health and change*. New York:

- Holt, 1961. Doi:
<https://doi.org/10.1177/001316446202200231>
28. Shaw M, Black DW. Internet addiction: Definition, assessment, epidemiology and clinical management. *CNS Drugs*. 2008; 22(5):353-365. Doi:
<https://doi.org/10.2165/00023210-200822050-00001>
29. Silva M, Resurrección DM, Antunes A, Frasilho D, Cardoso G. Impact of economic crises on mental health care: A systematic review. *Epidemiology and Psychiatric Sciences*. 2020; 29. Doi:
<https://doi.org/10.1017/s2045796018000641>
30. Stikkelbroek Y, Bodden DHM, Reitz E, Vollebergh WAM, van Baar AL. Mental health of adolescents before and after the death of a parent or sibling. *European Child & Adolescent Psychiatry*. 2016; 25(1):49-59. Doi: <https://doi.org/10.1007%2Fs00787-015-0695-3>
31. Tajan N, *et al.* Social withdrawal and psychiatry: A comprehensive review of Hikikomori, 2015. Doi:
<https://doi.org/10.1016/j.neurenf.2015.03.008>
32. Thombs DL, Beck KH. The social context of four adolescent drinking patterns. *Health Education Research*. 1994; 9(1):13-22. Doi:
<https://doi.org/10.1093/her/9.1.13>
33. UNFPA. March.COVID-19: A Gender Lens, 2020. https://www.unfpa.org/sites/default/files/resource-pdf/COVID-19_A_Gender_Lens_Guidance_Note.pdf
34. Uutela A. Economic crisis and mental health. *Current Opinion in Psychiatry*. 2010; 23(2):127-130. Doi:
<https://doi.org/10.1177%2F0141076813481770>
35. Wang G, Zhang Y, Zhao J, Zhang J, Jiang F. Mitigate the effects of home confinement on children during the COVID-19 outbreak. *The Lancet*. 2020; 395(10228):945-947. Doi:
[https://doi.org/10.1016/s0140-6736\(20\)30547-x](https://doi.org/10.1016/s0140-6736(20)30547-x)