

# **Mental Health, Stress, and Coping Strategies Among School-Going Adolescents: A Study of Educational Settings in Navi Mumbai Under the theme -Community-Based Mental Health Interventions at Educational Institutions**

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**Abstract:** Mental health has become an important concern among adolescents, especially at educational institutions where students face academic, social, emotional, and family-related pressures. Adolescence, particularly between the ages of 10 and 19 years, is an important stage of life noted by rapid physical, emotional, psychological, and behavioural changes. During this time, teens may feel stressed, anxious, depressed, pressured by their peers, afraid of failing, lonely, bullied, or unsure about their future. These problems can affect their academic performance, relationships, emotional stability, and general well-being.

The study is based on a fieldwork intervention conducted by MSW second-year students in a school in the Kukshet area of Nerul, Navi Mumbai. The study concentrates on understanding the major mental health challenges experienced by school-going adolescents and the coping strategies they adopt to deal with these issues. It analyses how school-going adolescents manage emotional stress and psychological problems through support from family members, friends, teachers, recreational activities, social media, and other personal coping methods. The data are collected through field visits and school observations. Data were collected using a structured interview schedule from a sample of 200 respondents. The collected data is analysed and presented through various tables, charts, and diagrams to understand the mental health issues and coping patterns among school-going adolescents.

The study also shows that while some school-going adolescents receive positive support and guidance from their families and peers, many others suffer silently because of stigma, lack of awareness, poor communication, and scarce access to counselling services. In many cases, students are unable to openly express their emotions or seek professional help for their problems. The paper emphasises the need to strengthen mental wellness support systems within educational institutions through counselling services, awareness programmes, peer support groups, life skills education, stress management activities, and social work interventions. It also suggests that schools, parents, teachers, social workers,

and local communities should work together to establish a supportive and healthy environment for school-age adolescents in Navi Mumbai.

**Keywords:** Mental Health, School-Going Adolescents, Educational Institutions, Coping strategies, Social Work Intervention, Navi Mumbai

## **INTRODUCTION**

The World Health Organisation defines adolescence as the age range of 10 to 19 years. According to UNICEF, India has the largest adolescent population in the world, with 253 million, and every fifth person is between 10 and 19 years old. This makes adolescents an important group for the country's social, economic, and developmental progress. Adolescence is one of the most sensitive stages of life. During this time, young people experience significant physical, emotional, social, and psychological changes. They start to create their own identities, deal with peer pressure, compete academically, and become more aware of family and social expectations.

In India, adolescents face various challenges related to education, family expectations, peer pressure, social media, career uncertainty, and changing lifestyles. Many adolescents experience stress, anxiety, low self-esteem, confusion, and emotional instability due to these pressures. At the same time, adolescence is similarly a stage of opportunities, learning, creativity, and self-development. Supporting adolescents through proper education, healthcare, counselling, life skills training, and family support is necessary for their healthy growth and future well-being.

According to the World Health Organisation, mental health is "a state of mental health status that enables people to cope with the stresses of life, realise their abilities, learn well and work well, and contribute to their community." Good mental health is important for adolescents because it affects academic success, self-confidence, emotional stability, social relationships, and future productivity.

Adolescent mental health issues have become much more common in India recently. Adolescents enrolled in school face a variety of issues, including peer relationships, social media, body image, job uncertainty, parental expectations, schooling, and shifting social surroundings. Students frequently experience emotional distress as a result of the increased competitiveness in school, pressure to perform well on tests, fear of failing, and expectations from parents and teachers. Adolescents who are unable to handle this kind of strain may

experience behavioural issues, anxiety, sadness, low self-esteem, aggression, loneliness, and sleep disorders.

According to the WHO, one in every seven 10- to 19-year-olds suffers from a mental condition, accounting for 15% of the global disease burden in this age range. Depression, anxiety, and behavioural problems are among the most common causes of sickness and impairment in teenagers (WHO, 2025).

The National Mental Health Survey shows that over 85% of Indians with common mental disorders do not seek or receive treatment. More than 70% of people with mental illness around the world don't have access to trained care. Still, experts said India's vast population and limited mental health infrastructure made the challenge particularly acute (The Times of India, 2026). In India, over 50 million children, including school students, suffer from mental illness. If the adolescent population is also considered as a whole, this number will increase further (Shastri, 2009).

An estimated 1 in 7 children and adolescents aged 10 to 19 are affected by mental health conditions, with anxiety, depression, and behavioural disorders among the most common. One-third of mental health conditions manifest before the age of 14 and half before the age of 18 years. Despite the clear need for action, access to mental health services for children and young people remains inadequate. The majority of young people experiencing mental health symptoms do not access care due to systematic barriers such as low service availability, unaffordable costs, and stigma preventing them from seeking help. Public funding and human resources for mental services in general are low worldwide; for mental health services aimed at children and young people, it is practically non-existent, especially in low- and middle-income countries (WHO, 2024)

### **Factors affecting adolescents' mental health**

**Academic Pressure:** Studies consistently link school pressures to anxiety, depression, low well-being, and low self-esteem in adolescence. In a study conducted in Karnataka, India, it was found that the majority of teens have been found to have substantial school-related stress and parental pressure, with around a third of teens having moderately high symptoms of anxiety, and more than half of the teens having low well-being (Times of India, 2025)

Social media use and excessive digital time are the most important factors affecting adolescent mental health. Studies suggest that prolonged smartphone use, especially on weekdays and late at night, is associated with poor sleep, reduced emotional well-being, increased anxiety, and depressive symptoms. Girls are often more vulnerable to the negative effects of social media because of online comparison, body image concerns, and cyberbullying.

Mental health issues among children and adolescents are frequently left unidentified and untreated until the effects convert the distress into dysfunction. This treatment gap is exacerbated by poor help-seeking behaviour, compounded by stigma and lack of awareness. There is a disturbing trend toward dismissing adolescents' problems as a normal part of growing up, often obscuring the reality of their experiences and allowing their concerns to fester without support (UNICEF, 2024)

The shortage of mental health services is another important challenge in India. Many schools lack trained counsellors, psychologists, or mental health programmes. Even when counselling services are available, they may not be easily accessible, affordable, or trusted by students. The data shows that over four out of five Indians suffering from psychiatric disorders do not get timely or adequate treatment, dropping millions to cope without professional care, the Indian Psychiatric Society warned on Saturday, flagging one of the widest mental health treatment gaps in the world. Schools often provide limited and fragmented emotional health support. Although schools are important spaces where adolescents spend much of their time, many educational institutions focus only on school performance and neglect mental well-being. Counselling services are either absent or insufficient in many schools. Recent reports show that even when governments try to appoint counsellors in schools, many posts remain vacant because of low salaries, lack of trained professionals, and poor implementation (Times of India, 2026)

School-based mental health programs have generally been implemented on a limited, fragmented scale, despite adolescent mental health being a priority area for development in the National Adolescent Health Program (Rashtriya Kishor Swasthya Karyakram, Ministry of Health and Family Welfare, Government of India, 2014). School- and community-based interventions are more relevant in low and middle-income countries where there is a shortage of mental health professionals. But, in this review, we found only one community-based intervention conducted among adolescents, with one arm implemented in a rural community

setting delivered through peer leaders, and the other delivered in an urban setting through trained teachers (Balaji, Andrews, Andrew, & Patel, 2011)

Research indicates that community-based social work interventions effectively tackle adolescent mental health issues by supporting familiar environments, including schools, families, peer groups, and local communities. These interventions are highly beneficial in India, where numerous adolescents refrain from pursuing professional assistance due to stigma, insufficient awareness, and restricted access to mental health services.

## **OBJECTIVES**

1. To understand the major mental health challenges faced by school-going adolescents at educational settings
2. To understand the coping strategies adopted by school-going adolescents to deal with mental health challenges.
3. To recommend strategies for strengthening mental health support services, awareness programs, counselling facilities, and peer support systems at educational settings.

## **METHODOLOGY**

**Study Area:** The study was conducted in a school in Navi Mumbai. It is a fast-developing urban area with a significant number of teenagers attending schools and junior colleges. Navi Mumbai has students from diverse socioeconomic backgrounds, educational settings, and family arrangements, making it an ideal location for studying adolescent mental health.

**Target group:** Adolescents aged 10–19 years.

**Sample:** Purposive sampling was used in this study, with 200 participants included.

**Data Collection Tool:** A structured questionnaire was used to collect data. The questionnaire included both closed-ended and open-ended questions. The questionnaire data included information on age, standards, school, stress levels, emotional issues, coping methods, peer relationships, family support, academic pressure, and other factors. **Data Analysis:** The collected data were analysed using both quantitative and qualitative methods. Quantitative data were presented through percentages, frequency tables, bar graphs, and pie charts to show the prevalence of mental health problems among adolescents.

## **FINDINGS & DISCUSSION**

### **Section: Stress, School Pressure, and Bullying**

**Table 1: Age of the Students**

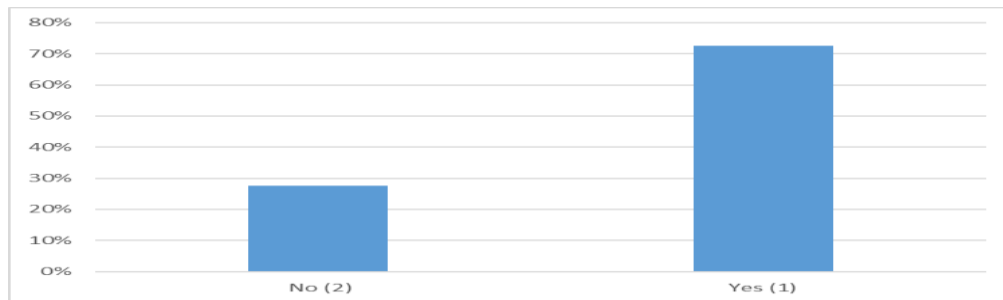
<b>Age of Respondents</b>	<b>Percentage (%)</b>
11 years	1.00%
12 years	4.50%
13 years	28.50%
14 years	41.50%
15 years	22.00%
16 years	2.50%
<b>Total</b>	<b>100%</b>

Table 1 presents data on the respondents' ages. The data shows that the majority (41.50%) of the respondents were 14 years old. The data also presents that (28.50%) of respondents belonged to the age of 13 years old, and 22% of respondents were 15 years old. The fewest respondents (4.5%) were 12 years old. The data show that the majority of respondents were between 13 and 15 years old.

**Table 2: Gender & Distribution of students by Class Standard**

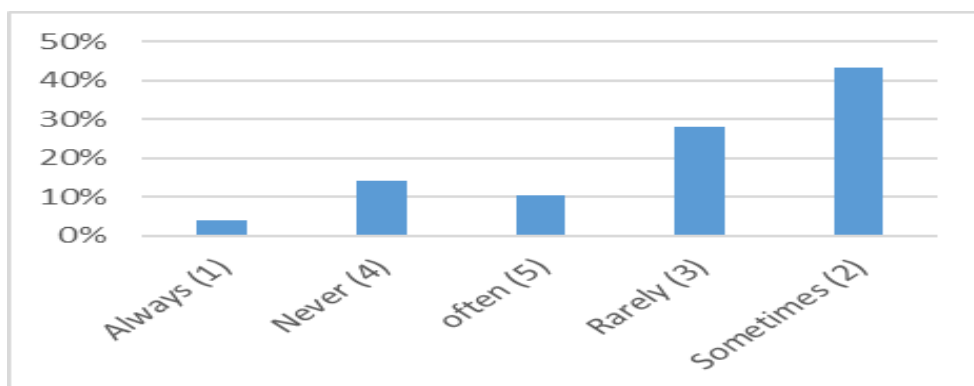
<b>Standard</b>	<b>Boys (%)</b>	<b>Girls (%)</b>	<b>Total (%)</b>
7th	15.50%	17.50%	33.00%
8th	17.00%	17.00%	34.00%
9th	19.00%	14.00%	33.00%
<b>Grand Total</b>	<b>51.50%</b>	<b>48.50%</b>	<b>100%</b>

Table 2 presents data on respondents' distribution among 7th, 8th, and 9th standards. The majority (34%) of the data shows that the largest number of respondents was in 8th standard. and (33%) of respondents belonged to the 7th and 9th standards. The data also shows that the majority (51.5%) of respondents were boys and (48.5%) were girls.



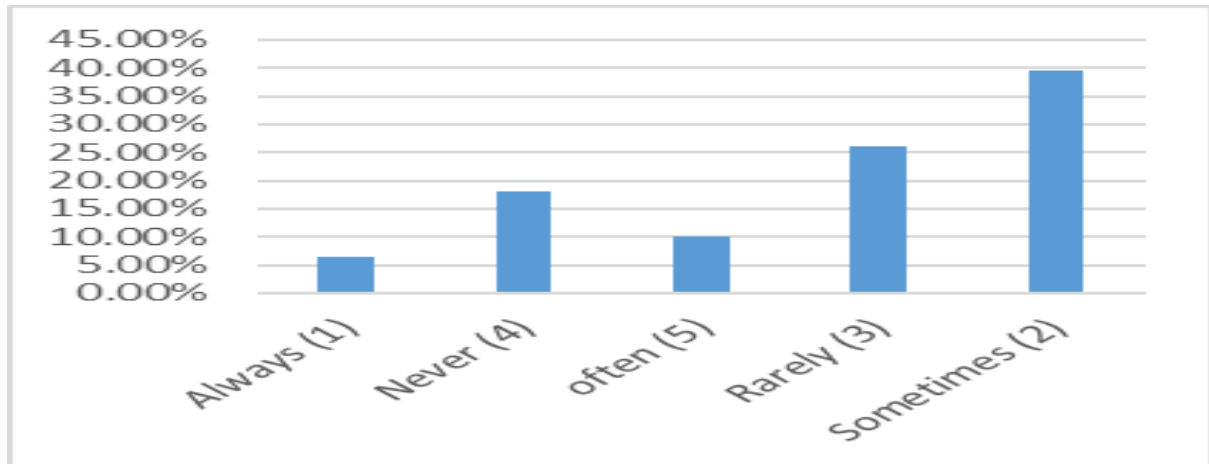
**Figure 1: Adolescents know what stress or pressure is**

Figure 1 presents data on stress. 75% of adolescents understand what stress is, while 29% percent did not know what stress is



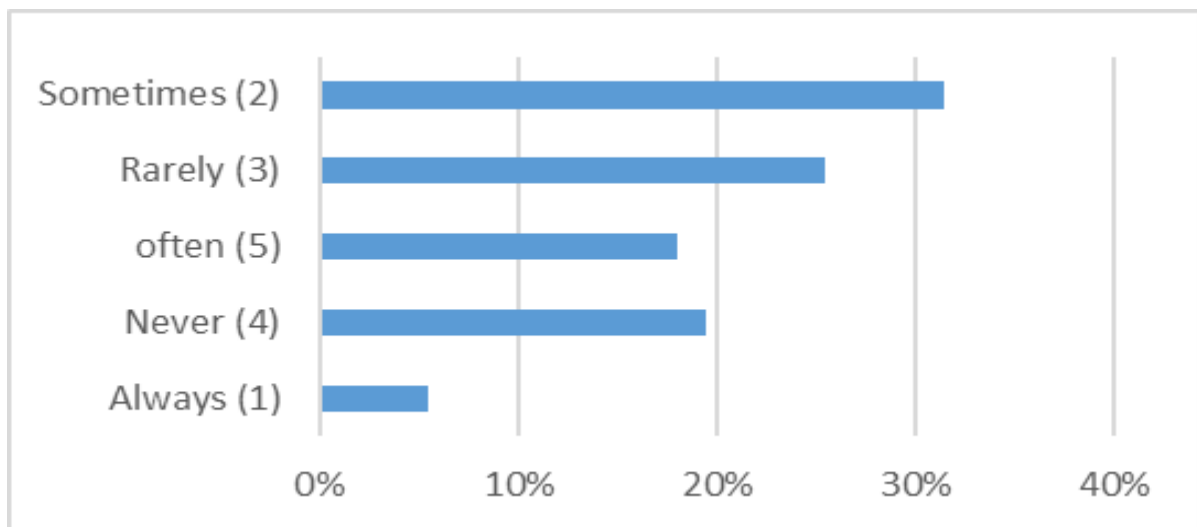
**Figure 2: Stress Due to Studies**

Figure 2 presents data on whether students feel stress due to study pressure. The data showed that the majority (43%) of respondents feel stress due to studies. 15% of respondents said they never feel stressed; 10% said they often feel stressed due to studies, and only 5% said they always feel stressed due to studies.



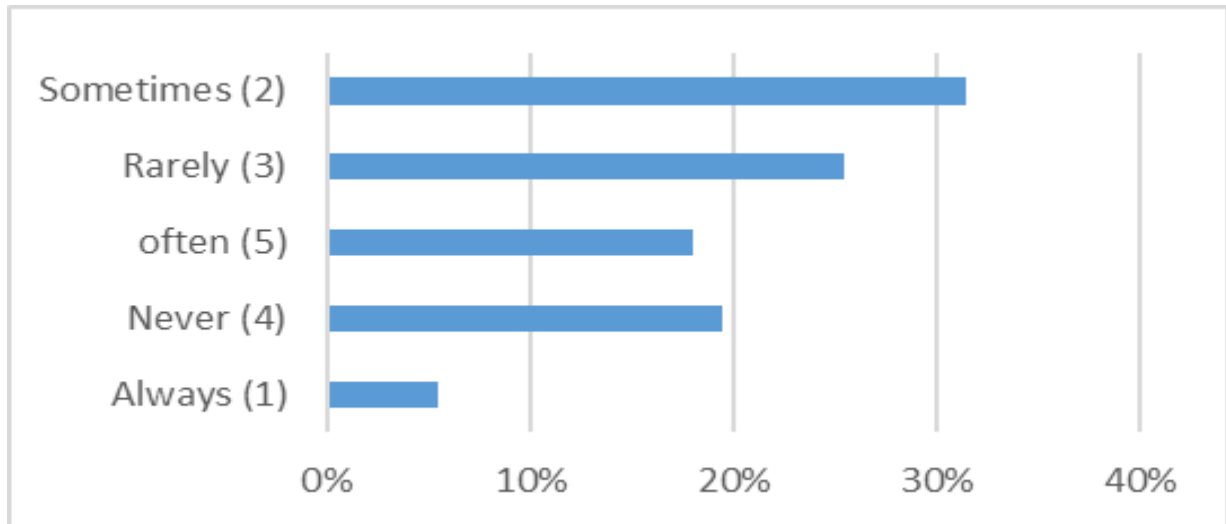
**Figure 3: Pressure to Complete Homework and Projects on Time**

Figure 3 presents data on whether respondents feel pressure to complete the homework and project on time. The data show that around 26% of respondents said they rarely feel pressure to complete homework and projects on time. The data also show that 18% of respondents said they never feel pressure, and 10% said they often feel pressure.



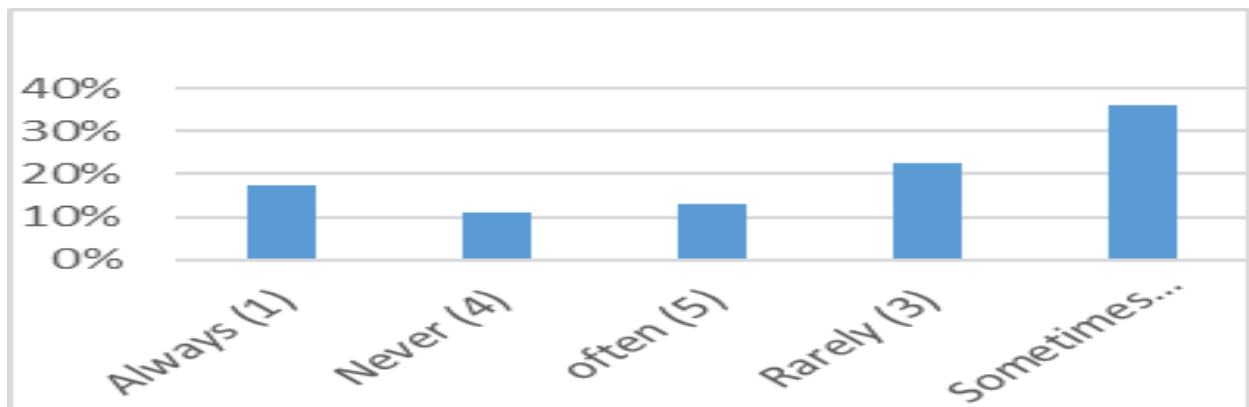
**Figure 4: Stress Due to Parents' Expectations**

Figure 4 presents data on whether respondents feel stress due to parents' expectations, and out of the total respondents, 31% said that they sometimes feel stress due to their parents' expectations. 25% of respondents said they feel stressed infrequently, and 19% said they are not stressed at all due to parents' expectations. Only 6% of respondents said they always feel stressed because of their parents' expectations.



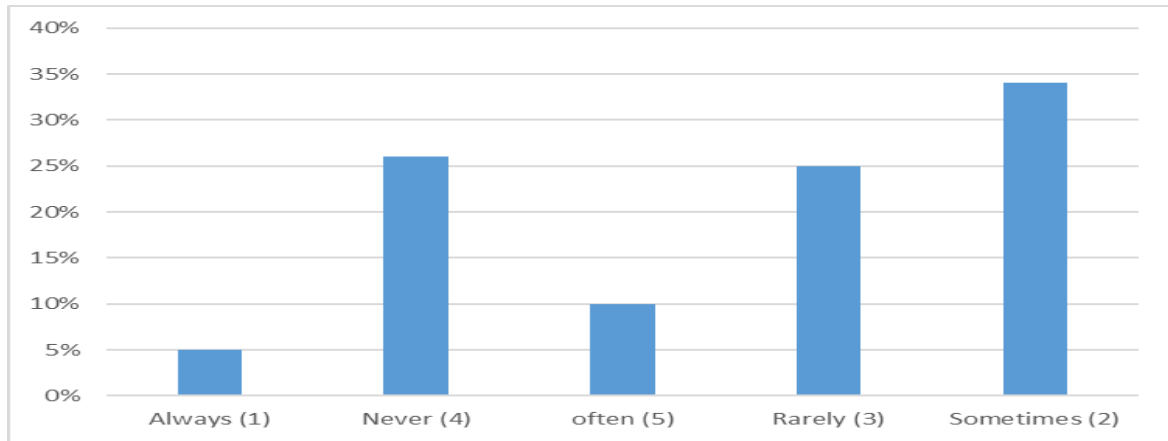
**Figure 5: Stress Due to Teachers' Expectations**

Figure 5 presents data on whether respondents feel stressed due to teachers' expectations, showing that 31% said they sometimes feel stressed. The data also showed that 25% of respondents said that they rarely feel stress due to teachers' expectations.



**Figure 6: Anxiety Due to Low Marks**

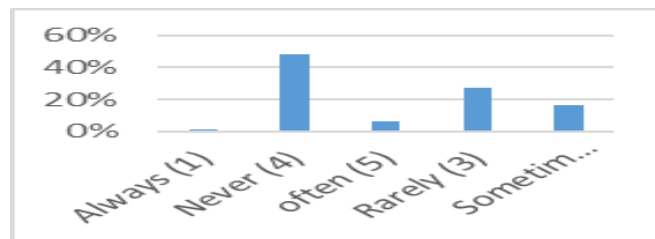
Figure 6 presents data on anxiety among respondents, and it shows that 36% of respondents sometimes feel anxiety due to low marks in the examinations. Out of the total respondents, 22% said they rarely feel anxious because of low marks. While 13% said they often feel anxiety, 17% said they always feel anxiety, and only 11% said they feel no anxiety due to low marks in the examination.



**Figure 7: Stress Due to Competition in School**

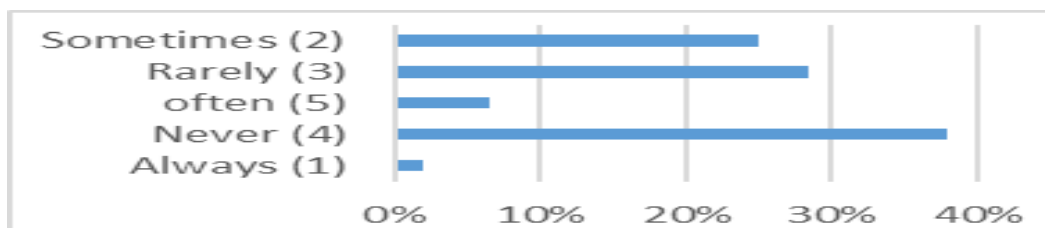
Figure 7 presents data on whether respondents feel stressed by competition at school. The data show that 34% of respondents sometimes feel stress, and 26% never feel stress due to competition in school. The data also show that 26% of respondents said they never feel stress, and only 5% said they always feel stress due to competition in school.

**Section 2. Emotions, Feelings & Behaviour**



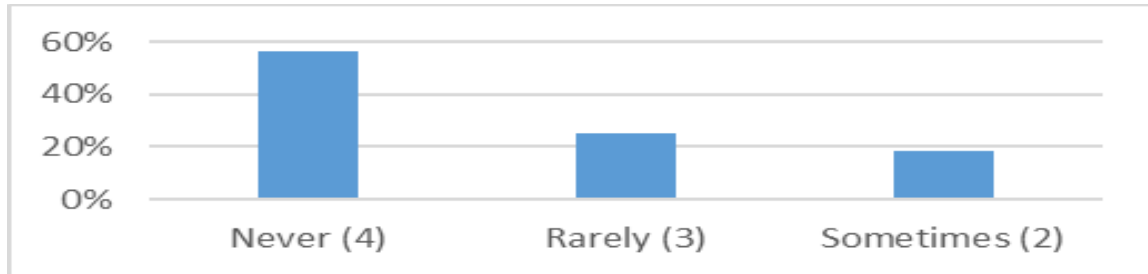
**Figure 8: Fear of Going to School**

Figure 8 shows that adolescents never feel fear of going to school; 45% of respondents said that they never feel fear of going to school. 25% of respondents said that they rarely feel fear of going to school. The overall data show that school is a better place for respondents.



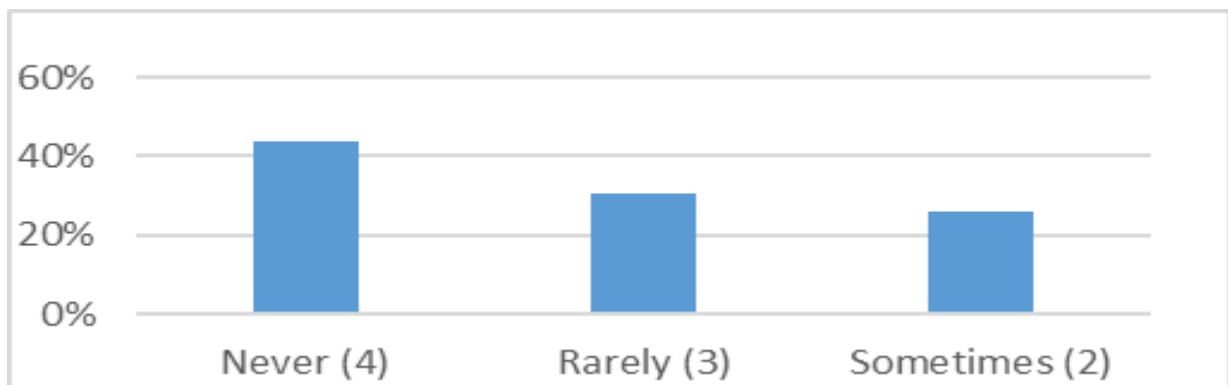
**Figure 9: Teasing Based on Physical Appearance**

Figure 9 shows that 38% respondents said they were never teased about their physical appearance, 28% said they had been teased rarely, and only 1% respondents said they had been teased about their physical appearance



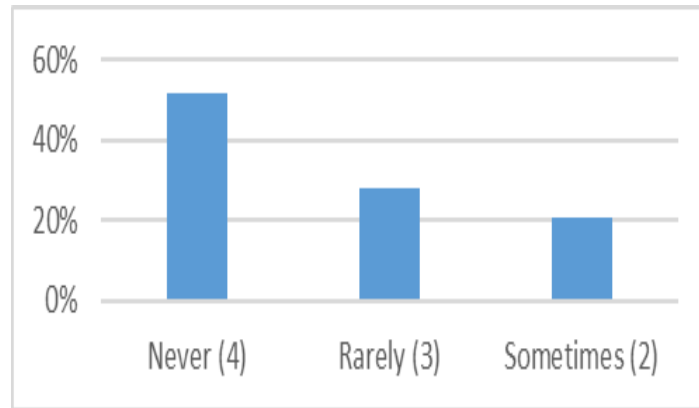
**Figure 10: Harassment Through Social Media or Mobile**

Figure 10 presents data on harassment through social media or mobile. The data shows that around 48% of respondents said they were never harassed, and very few (less than 10%) said they sometimes feel harassed.



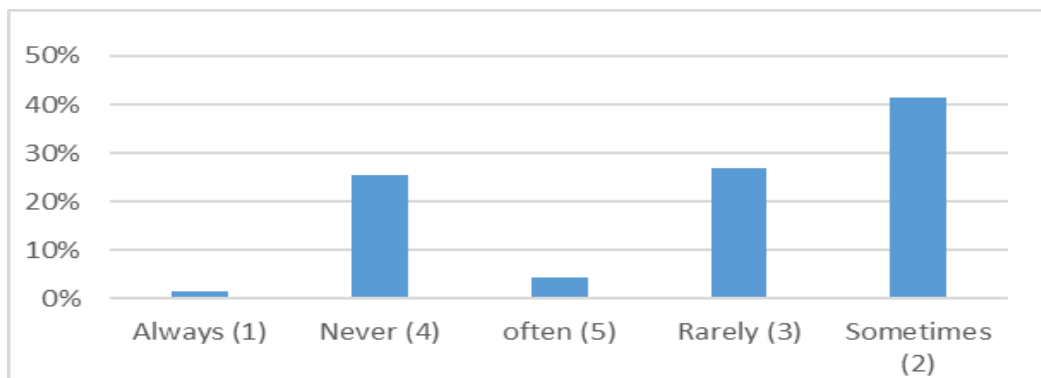
**Figure 11: Use of Abusive Language by Other Students**

Figure 11 presents data on abusive language used by other students at the school. As per the data, around 42% of respondents said that they were never abused, and around 25% of respondents said they were sometimes abused by other students in the school.



**Figure 12: Exclusion from Peer Groups**

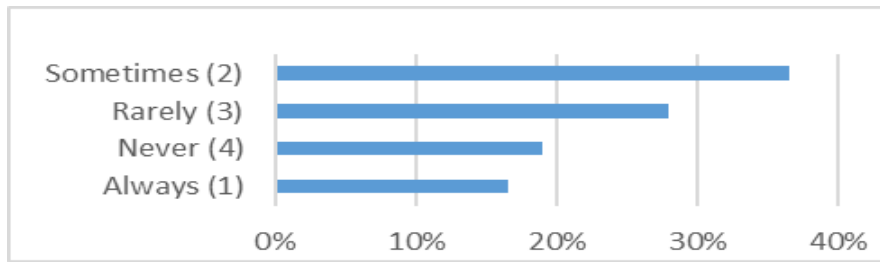
Figure 12 presents whether they feel excluded from the peer groups in the school. The data showed that around 46% of respondents said they never feel excluded, and only 20% said they sometimes feel excluded from their peer groups at school.



**Figure 13: Never Feeling Relaxed**

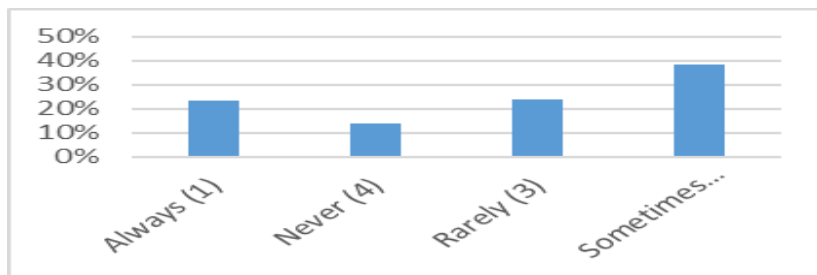
Figure 13 presents data on respondents' feelings of relaxation in the school. The data show that around 41% of respondents sometimes feel relaxed, more than 25% rarely feel relaxed, and around 22% never feel relaxed.

### Section 3. Help-seeking behaviour



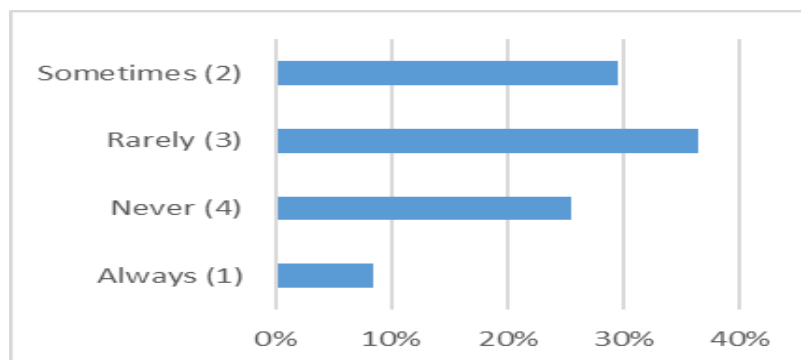
**Figure 14: Talking to Parents During Stress**

Figure 14 presents data on whether respondents talk to parents during stress: more than 38% said they sometimes talk to their parents, and more than 25% said they rarely do. The data showed that most respondents do not always talk to parents during stress.



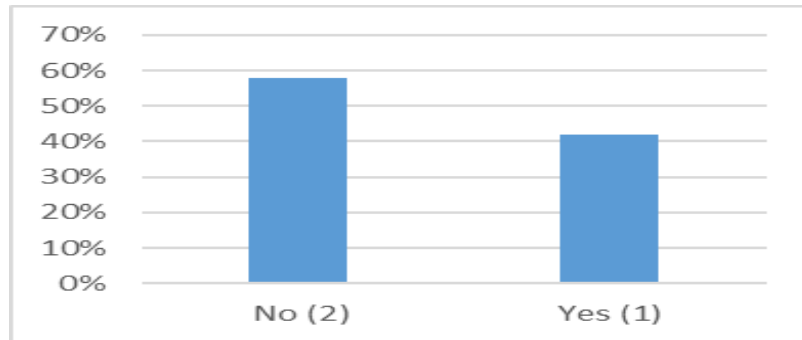
**Figure 15: Talking to Friends During Stress**

Figure 15 presents data on talking to friends during stress, and as per the result, more than 39% of respondents said that they sometimes talk to friends during stress, and more than 20% of respondents said that they rarely talk to friends during stress. The data also showed that more than 12% of respondents said that they never talk to friends during stress.



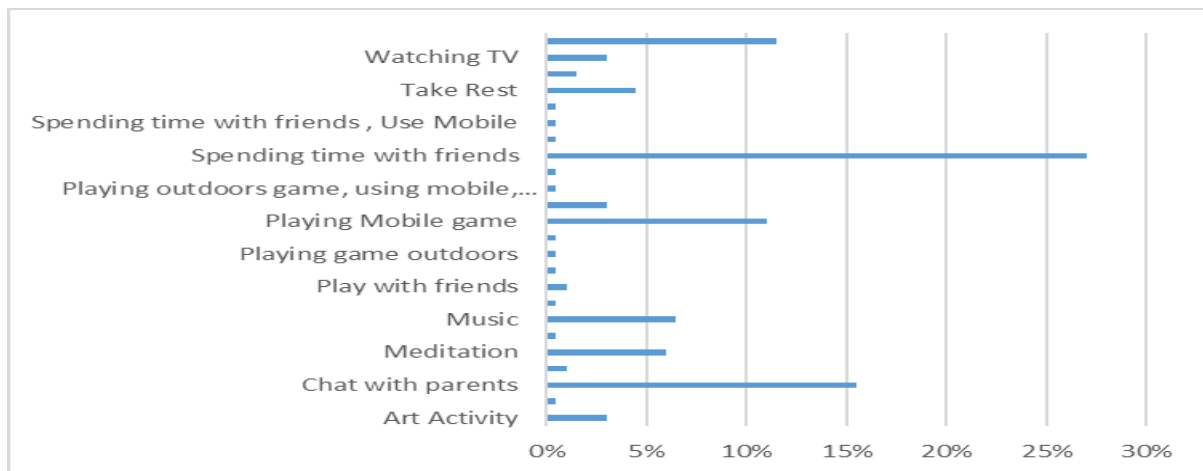
**Figure 16: Talking to Teachers During Stress**

Figure 17 presents data on talking to teachers during stress. More than 29% of respondents sometimes talk to teachers during stress, and more than 35% of respondents rarely talk to friends during stress. The data also showed that more than 25% of respondents said that they never talk to friends during stress.



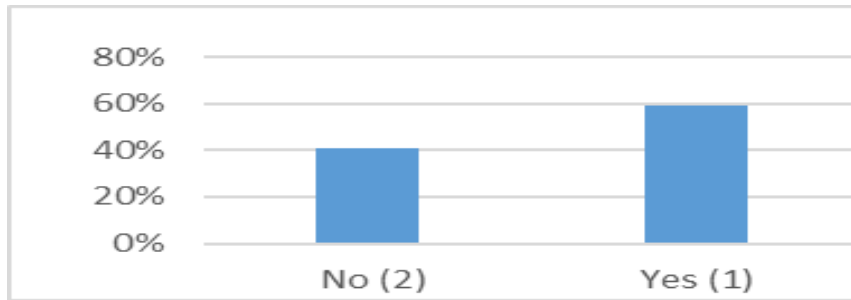
**Figure 18: Not Talking to Anyone During Stress**

Figure 18 presents data on talking to no one during stress, and as per the result, it shows that more than 55% of respondents said they talk to no one during stress.



**Figure 19: Methods Used to Reduce Stress**

Figure 19 presents data on methods used to reduce stress. The majority of respondents reported spending time with friends (over 25%), chatting with parents (over 15%), and watching TV (over 10%) to reduce stress.



**Figure 20: Need for Help to Reduce Stress**

Figure 20 presents data showing that around 60% of respondents need help to reduce stress, while 40% do not.

### **DISCUSSION/SUMMARY/RECOMMENDATION**

The study's overall findings show that respondents were between 13 and 15 years old; the majority conference, examinations, and competition at school. The respondents also said that they feel stress due to parents' and teachers' expectations. The findings showed that one of the most important concerns of respondents was anxiety due to low marks, which many of them reported experiencing.

The findings also highlight the positive aspects, and most respondents said they do not fear going to school. It also showed another positive aspect: most respondents said they were never teased about their physical appearance. It also shows that many respondents reported experiencing a lack of harassment, abuse, or exclusion in school. On the other hand, some of the respondents still said that they feel harassed, abused, and excluded in school, which can affect the mental health of the respondents.

The findings also show that the majority of respondents sometimes keep their stress to themselves, and more than half said they do not talk to anyone during stress. It also indicated that the majority of respondents said they need help managing stress.

Overall findings show that the majority of respondents face various mental health stresses, mainly due to school pressure and expectations. Therefore, schools should provide counselling, stress-management activities, and mental health awareness programmes to support students.

### **School-Based Intervention**

1. Establish counselling services for students to discuss their emotional problems.
2. Establish separate career guidance and academic counselling for the students.
3. Social workers should be appointed at the school to organise mental health awareness programmes and workshops.
4. Provide training to the teachers to identify early signs of stress, anxiety, depression, bullying, and fear among students.
5. Create peer support groups; it will help students to share their feelings and receive emotional support.
6. Encourage students to participate in recreational activities such as sports, music, and cultural programmes.

### **Community-Based Intervention**

1. **Community awareness programmes:** They are an important step that should be organised to educate parents and community members about adolescent mental health issues and the importance of early support.
2. **Organise campaigns:** Government and local authorities should organise campaigns on stress management, mental health awareness, and students' emotional well-being.
3. **Training for Parents:** The government should provide parents with training to identify behavioural changes, emotional distress, and warning signs of students' mental health problems.
4. **Collaboration:** Schools, families, health professionals, social workers, and local communities should collaborate to strengthen a supportive environment for adolescents.

### **CONCLUSION**

The study concludes that the mental health issues among school-going students are becoming a major health problem in educational institutions. Students are facing various problems, such as stress, family and societal pressure, anxiety, fear of failure, peer pressure, family conflict,

loneliness, and academic pressure. These issues not only affect their emotional well-being but also influence their academic performance, behaviour, relationships, and overall development.

The findings show that although some students receive support from parents, friends, and teachers, many adolescents continue to suffer silently because of stigma, lack of awareness, fear of judgment, and poor communication. Mental health services in schools and communities are still very limited, and many students do not have access to counselling or professional guidance when they need it.

Therefore, it is time to address mental health issues among adolescents seriously. Greater awareness, open discussion, counselling support, and positive family and school environments are necessary to improve students' mental well-being. A short recommendation of the study is that schools should appoint trained social workers or counselors to provide mental health support and organise regular awareness programmes for students, parents, and teachers.

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