



Amitrakshar International Journal

of Interdisciplinary and Transdisciplinary Research (AIJITR)

(A Social Science, Science and Indian Knowledge Systems Perspective)

Open-Access, Peer-Reviewed, Refereed, Bi-Monthly, International E-Journal

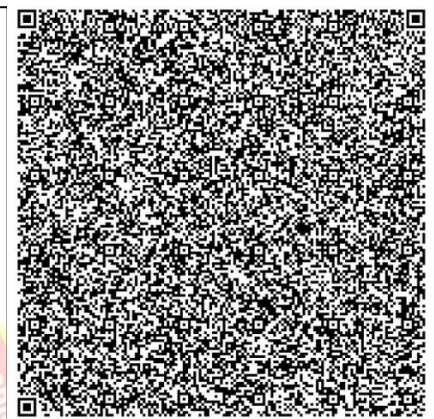
Regional Variations in Adolescent Mental Health: A Comparative Study of Depression, Anxiety, and Stress in West Bengal and Tripura

Poulomi Mukherjee¹ and Dr. Mita Howladar²

Abstract

Adolescent mental health has emerged as a critical public health concern due to increasing academic pressure, socio-economic challenges, and rapid social change. Depression, anxiety, and stress significantly influence adolescents' emotional well-being, academic performance, and social adjustment. The present study aims to examine and compare the levels of depression, anxiety, and stress among adolescent students in two eastern Indian states—West Bengal and Tripura. Using a comparative and descriptive research design, data were collected from school-going adolescents through a standardized psychological scale. The findings reveal noticeable regional variations in mental health outcomes, with adolescents from Tripura reporting comparatively higher levels of depression and anxiety than those from West Bengal, while stress levels were found to be relatively similar. The study highlights the role of regional, cultural, and socio-economic factors in shaping adolescent mental health and emphasizes the need for state-specific mental health interventions, school-based counseling services, and early identification strategies. The results contribute to the growing body of literature on adolescent mental health in India and offer practical implications for educators, mental health professionals, and policymakers.

Keywords: Adolescent mental health, Depression, Anxiety, Stress, Regional variation, West Bengal, Tripura



AIJITR - Volume - 3, Issue - I, Jan-Feb 2026



Copyright © 2026 by author (s) and (AIJITR).
This is an Open Access article distributed
under the terms of the Creative Commons
Attribution License (CC BY 4.0)
(<https://creativecommons.org/licenses/by/4.0>)

INTRODUCTION

Adolescence is a crucial developmental stage marked by rapid physical, emotional, cognitive, and social changes. During this transitional phase, individuals are particularly vulnerable to mental health problems such as depression, anxiety, and stress. According to the World Health Organization, a significant proportion of mental health disorders begin during adolescence, often continuing into adulthood if not addressed early. In India, adolescents constitute a substantial segment of the population, making their mental well-being a national priority.

Depression among adolescents is characterized by persistent sadness, loss of interest, low self-esteem, and feelings of hopelessness. Anxiety manifests as excessive worry, fear, and nervousness, often related to academic performance, peer relationships, and future uncertainty. Stress arises from internal and external pressures, including examinations, parental expectations, socio-economic conditions, and social comparisons.

India's socio-cultural diversity results in regional variations in lifestyle, education systems, family structures, and access to mental health resources. States such as West Bengal and Tripura, despite geographical proximity, differ in

¹ Ph.D. Scholar, Department of Education, Jadavpur University, Kolkata, WB, India

² Associate professor, Department of Education, Jadavpur University, Kolkata, WB, India

DOI Link (Crossref) Prefix: <https://doi.org/10.63431/AIJTR/3.I.2026.119-123>

AIJITR, Volume 3, Issue –I, January-February, 2026, PP.119-123

Received on 25th February, 2026 & Accepted on 27th February, 2026, Published: 28th February, 2026



Amitrakshar International Journal

of Interdisciplinary and Transdisciplinary Research (AIJITR)

(A Social Science, Science and Indian Knowledge Systems Perspective)

Open-Access, Peer-Reviewed, Refereed, Bi-Monthly, International E-Journal

terms of economic development, educational infrastructure, cultural practices, and availability of psychological services. These differences may significantly influence adolescents' mental health experiences.

The present study seeks to explore and compare the levels of depression, anxiety, and stress among adolescent students in West Bengal and Tripura, thereby contributing to region-specific understanding of adolescent mental health issues.

Review of Literature

Patel et al. (2007) highlighted that mental health disorders frequently begin during adolescence and are often underdiagnosed in developing countries. Their study emphasized that socio-economic inequality and limited access to mental health services significantly increase the prevalence of depression and anxiety among adolescents in low- and middle-income regions such as India.

Deb, Strodl, and Sun (2015) examined academic stress among Indian high school students and found that examination pressure and parental expectations were major contributors to anxiety and stress. The study reported higher psychological distress among students preparing for board examinations, irrespective of gender and region.

Thapar et al. (2012) explored the developmental trajectory of adolescent depression and concluded that early adolescence is a vulnerable period for the onset of depressive symptoms. The authors stressed the importance of school-based screening programs to identify mental health problems at an early stage.

Kumar and Akoijam (2017) conducted a study in northeastern India and found moderate to severe levels of depression and anxiety among higher secondary students. The researchers attributed these findings to academic burden, limited counseling facilities, and socio-cultural factors unique to the region.

Verma and Gupta (2014) investigated stress among Indian adolescents and observed that stress levels were influenced by family environment, peer relationships, and academic demands. Their findings suggested that adolescents from supportive family backgrounds exhibited lower stress and better emotional adjustment.

Sahoo and Khes (2010) studied anxiety disorders among Indian adolescents and reported that school-related factors, including teacher expectations and classroom competition, significantly affected students' anxiety levels. The authors emphasized the need for mental health awareness among teachers.

Bhasin et al. (2010) analyzed the prevalence of depression among adolescents in urban and rural settings and found higher depressive symptoms in rural and semi-urban areas. The study pointed out that lack of awareness and stigma surrounding mental illness contributed to delayed intervention.

Das and Banerjee (2018) conducted a comparative study on adolescent stress in eastern India and reported that while stress was common across regions, coping mechanisms varied depending on cultural and educational contexts. The study underscored the influence of regional diversity on adolescent mental health outcomes.

WHO (2021) emphasized that depression, anxiety, and stress are among the leading causes of illness and disability in adolescents globally. The report highlighted the need for region-specific mental health policies, especially in countries with diverse socio-cultural settings like India.

Thakur and Jain (2020) reviewed adolescent mental health initiatives in India and identified significant gaps in service delivery, particularly in rural and northeastern states. The authors recommended strengthening school-based mental health programs and integrating mental health services into primary healthcare systems.

Objectives of the Study

1. To assess the levels of depression among adolescent students in West Bengal and Tripura.
2. To examine the levels of anxiety among adolescent students in West Bengal and Tripura.
3. To analyze the levels of stress among adolescent students in West Bengal and Tripura.
4. To compare the mental health status of adolescents across the two states.
5. To identify regional variations in adolescent mental health outcomes.

Results and Discussion

The present study aimed to assess and compare the levels of depression, anxiety, and stress among adolescent students in West Bengal and Tripura, and to examine regional variations in adolescent mental health outcomes. The results are discussed objective-wise to provide clarity and systematic interpretation of the findings. The discussion integrates empirical findings with existing literature and contextual socio-cultural explanations.

1. Depression Levels among Adolescent Students in West Bengal and Tripura

The analysis of depression scores revealed a noticeable difference between adolescent students from West Bengal and Tripura. Adolescents in Tripura exhibited comparatively higher levels of depressive symptoms than their counterparts in West Bengal. A greater proportion of students in Tripura fell into the moderate to severe categories of depression,



Amitrakshar International Journal

of Interdisciplinary and Transdisciplinary Research (AIJITR)

(A Social Science, Science and Indian Knowledge Systems Perspective)

Open-Access, Peer-Reviewed, Refereed, Bi-Monthly, International E-Journal

whereas the majority of adolescents in West Bengal were found to be within the normal to mild range. This difference may be attributed to a combination of socio-economic, educational, and infrastructural factors. Tripura, being a relatively smaller and geographically isolated state, faces limitations in terms of educational resources, mental health awareness, and access to professional psychological services. Many adolescents in the region experience uncertainty related to higher education opportunities, employment prospects, and social mobility, which may contribute to feelings of hopelessness and emotional distress. In contrast, West Bengal has relatively better access to educational institutions, exposure to urban centers, and awareness regarding mental health issues, especially in semi-urban and urban areas. Adolescents in these settings may benefit from greater peer interaction, extracurricular activities, and informal support systems, which can act as protective factors against depression. The findings align with earlier studies that report higher prevalence of depressive symptoms among adolescents in economically and geographically disadvantaged regions. Research conducted in northeastern India has similarly highlighted the role of social isolation, limited opportunities, and lack of counseling services in increasing vulnerability to depression. The present study reinforces the argument that regional context plays a significant role in shaping adolescents' emotional well-being. Furthermore, academic pressure emerged as a common contributing factor to depression in both states. However, its psychological impact appeared to be more severe among adolescents in Tripura, possibly due to fewer alternative coping avenues and limited guidance facilities. The results underscore the importance of strengthening school-based mental health screening and counseling services, particularly in regions with higher depressive symptomatology.

2. Anxiety Levels among Adolescent Students in West Bengal and Tripura

The assessment of anxiety levels indicated that adolescent students from Tripura reported significantly higher anxiety compared to those from West Bengal. A substantial proportion of Tripura adolescents experienced moderate to high anxiety levels, while West Bengal students predominantly exhibited mild to moderate anxiety. Anxiety among adolescents is often linked to academic demands, fear of failure, social expectations, and uncertainty about the future. In Tripura, these concerns may be intensified due to limited exposure to competitive environments and fewer preparatory resources for higher education and employment. The perceived gap between aspirations and available opportunities can heighten anticipatory anxiety and performance-related stress. In West Bengal, although anxiety was present among adolescents, it appeared to be relatively more manageable. Exposure to competitive academic environments, coaching facilities, and peer networks may help students develop coping strategies to deal with anxiety. Moreover, increased awareness of mental health issues through media, educational programs, and digital platforms may contribute to early recognition and informal management of anxiety symptoms. The findings are consistent with previous research indicating that adolescents from less developed or remote regions tend to report higher anxiety levels due to uncertainty and lack of institutional support. School-related factors such as examination pressure, teacher expectations, and peer competition were identified as major sources of anxiety in both states, suggesting that the education system itself contributes significantly to adolescent anxiety. Notably, the results highlight that anxiety is not solely an individual psychological issue but is deeply influenced by structural and contextual factors. Addressing adolescent anxiety therefore requires not only individual-level interventions but also systemic reforms in educational practices, such as reducing excessive academic pressure and promoting supportive learning environments.

3. Stress Levels among Adolescent Students in West Bengal and Tripura

The analysis of stress levels revealed that adolescents in both West Bengal and Tripura experienced moderate levels of stress, with no substantial difference between the two states. This finding suggests that stress is a pervasive experience among adolescents, largely driven by common factors such as academic workload, examinations, time constraints, and parental expectations. The similarity in stress levels across the two regions indicates that the Indian education system exerts uniform pressure on students, regardless of geographical or cultural differences. Board examinations, competitive entrance tests, and performance-based evaluation systems create a high-stress environment for adolescents nationwide.

Despite similar stress levels, the nature and interpretation of stress appeared to vary between the two states. In West Bengal, stress was often associated with competition, academic achievement, and career planning. Adolescents in Tripura, on the other hand, reported stress related to uncertainty, limited resources, and fear of falling behind peers from more developed regions. The findings support earlier studies that emphasize academic stress as a universal phenomenon among Indian adolescents. However, the way adolescents cope with stress depends largely on available support systems, including family support, peer networks, and school counseling services. Adolescents with access to emotional support and guidance are more likely to manage stress effectively, preventing it from escalating into more severe mental health problems.



Amitrakshar International Journal

of Interdisciplinary and Transdisciplinary Research (AIJITR)

(A Social Science, Science and Indian Knowledge Systems Perspective)

Open-Access, Peer-Reviewed, Refereed, Bi-Monthly, International E-Journal

The results highlight the need for stress management programs within schools, such as life skills education, mindfulness training, and time management workshops. Such interventions can equip adolescents with coping strategies to handle stress more effectively, irrespective of regional differences.

4. Comparison of Mental Health Status of Adolescents across West Bengal and Tripura

A comparative analysis of overall mental health status revealed that adolescents from Tripura were more vulnerable to psychological distress than those from West Bengal. Higher levels of depression and anxiety, combined with moderate stress, indicate a comparatively fragile mental health profile among Tripura adolescents. In West Bengal, while stress was prevalent, lower levels of depression and anxiety suggest relatively better emotional adjustment. This may be attributed to greater exposure to social interaction, extracurricular activities, and institutional support. Urbanization and educational diversity in West Bengal may provide adolescents with multiple avenues for self-expression and emotional release.

The comparative findings highlight that mental health is not merely an individual concern but is shaped by broader social and environmental factors. Differences in economic development, educational infrastructure, cultural practices, and availability of mental health services contribute significantly to regional disparities in adolescent mental health. These results are in line with socio-ecological models of mental health, which emphasize the interaction between individual, family, school, and community factors. Adolescents in regions with limited support structures are more likely to experience psychological distress, underscoring the need for targeted interventions.

5. Identification of Regional Variations in Adolescent Mental Health Outcomes

The study clearly demonstrates the presence of regional variations in adolescent mental health outcomes between West Bengal and Tripura. Depression and anxiety were more pronounced among adolescents in Tripura, while stress levels were similar across both states. These variations may be explained by differences in socio-economic conditions, educational opportunities, cultural expectations, and mental health awareness. In Tripura, factors such as geographical isolation, limited professional counseling services, and socio-economic challenges may exacerbate mental health problems among adolescents.

The findings suggest that a uniform national approach to adolescent mental health may not be sufficient. Instead, region-specific mental health policies and interventions are required to address the unique challenges faced by adolescents in different parts of the country. School-based mental health programs, teacher training, parental awareness initiatives, and integration of mental health services into primary healthcare can play a crucial role in reducing regional disparities. Early identification of depression and anxiety can prevent long-term psychological problems and improve overall quality of life for adolescents.

The results of the present study highlight that adolescent mental health is a multifaceted issue influenced by academic, socio-economic, and regional factors. While stress appears to be a common experience among adolescents across regions, depression and anxiety show significant regional variation. The findings reinforce the need for a holistic approach to adolescent mental health that combines educational reform, community support, and accessible mental health services. Addressing adolescent mental health not only improves individual well-being but also contributes to healthier and more productive societies.

Conclusion

The present comparative study highlights significant regional variations in adolescent mental health between West Bengal and Tripura. Adolescents in Tripura exhibit higher levels of depression and anxiety, while stress levels remain comparable across both states. These findings emphasize the need for targeted mental health interventions that consider regional socio-economic and cultural contexts.

School-based mental health programs, counseling services, teacher sensitization, and parental awareness initiatives should be strengthened, particularly in regions with limited mental health infrastructure. Early identification of psychological distress among adolescents can prevent long-term mental health issues and promote overall well-being. Policymakers and educators must collaborate to develop inclusive, culturally sensitive, and region-specific mental health strategies to support India's adolescent population.

References

1. World Health Organization. (2021). *Adolescent mental health*. Geneva: WHO.
2. Patel, V., Flisher, A. J., Hetrick, S., & McGorry, P. (2007). Mental health of young people: A global public-health challenge. *The Lancet*, 369(9569), 1302–1313.
3. Deb, S., Strodl, E., & Sun, J. (2015). Academic stress, parental pressure, anxiety and mental health among Indian high school students. *International Journal of Psychology and Behavioral Sciences*, 5(1), 26–34.



Amitrakshar International Journal

of Interdisciplinary and Transdisciplinary Research (AIJITR)

(A Social Science, Science and Indian Knowledge Systems Perspective)

Open-Access, Peer-Reviewed, Refereed, Bi-Monthly, International E-Journal

4. Kumar, S., & Akoijam, B. S. (2017). Depression, anxiety and stress among higher secondary school students in Manipur. *Indian Journal of Community Medicine*, 42(2), 94–96.
5. Thakur, J. S., & Jain, S. (2020). Adolescent mental health in India: Challenges and opportunities. *Indian Journal of Psychiatry*, 62(5), 517–525.

